



HEALTH QUARTERLY STATEMENT

AS OF MARCH 31, 2017
OF THE CONDITION AND AFFAIRS OF THE

Anthem Health Plans of Maine, Inc.

NAIC Group Code 0671 0671 NAIC Company Code 52618 Employer's ID Number 31-1705652
(Current) (Prior)

Organized under the Laws of Maine, State of Domicile or Port of Entry ME

Country of Domicile United States of America

Licensed as business type: Other

Is HMO Federally Qualified? Yes [] No [X]

Incorporated/Organized 03/10/2000 Commenced Business 06/05/2000

Statutory Home Office 2 Gannett Drive South Portland, ME, US 04106-6911
(Street and Number) (City or Town, State, Country and Zip Code)

Main Administrative Office 2 Gannett Drive
(Street and Number)
South Portland, ME, US 04106-6911 866-583-6182
(City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)

Mail Address 2 Gannett Drive South Portland, ME, US 04106-6911
(Street and Number or P.O. Box) (City or Town, State, Country and Zip Code)

Primary Location of Books and Records 2 Gannett Drive
(Street and Number)
South Portland, ME, US 04106-6911 866-583-6182
(City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)

Internet Website Address www.anthem.com

Statutory Statement Contact Dan Wolke 317-488-6245
(Name) (Area Code) (Telephone Number)
dan.wolke@anthem.com 317-488-6200
(E-mail Address) (FAX Number)

OFFICERS

President and Chairperson Daniel Patrick Corcoran Treasurer Robert David Kretschmer
Secretary Kathleen Susan Kiefer Assistant Secretary and Clerk Lendall Libby Smith Esq.

OTHER

Mark Daniel Justus, Valuation Actuary Eric (Rick) Kenneth Noble, Assistant Treasurer

DIRECTORS OR TRUSTEES

| | | |
|---------------------------------|--------------------------------|------------------------------|
| <u>Daniel Patrick Corcoran</u> | <u>Carter Allen Beck</u> | <u>Kathleen Susan Kiefer</u> |
| <u>Ronald William Penczek</u> | <u>Robert David Kretschmer</u> | <u>John Edward Gallina</u> |
| <u>Catherine Irene Kelaghan</u> | | |

State of Maine SS:
County of Cumberland

The officers of this reporting entity being duly sworn, each depose and say that they are the described officers of said reporting entity, and that on the reporting period stated above, all of the herein described assets were the absolute property of the said reporting entity, free and clear from any liens or claims thereon, except as herein stated, and that this statement, together with related exhibits, schedules and explanations therein contained, annexed or referred to, is a full and true statement of all the assets and liabilities and of the condition and affairs of the said reporting entity as of the reporting period stated above, and of its income and deductions therefrom for the period ended, and have been completed in accordance with the NAIC Annual Statement Instructions and Accounting Practices and Procedures manual except to the extent that: (1) state law may differ; or, (2) that state rules or regulations require differences in reporting not related to accounting practices and procedures, according to the best of their information, knowledge and belief, respectively. Furthermore, the scope of this attestation by the described officers also includes the related corresponding electronic filing with the NAIC, when required, that is an exact copy (except for formatting differences due to electronic filing) of the enclosed statement. The electronic filing may be requested by various regulators in lieu of or in addition to the enclosed statement.

| | | |
|---------------------------|------------------------------|--------------------------------|
| <u>Daniel P. Corcoran</u> | <u>Kathleen Susan Kiefer</u> | <u>Robert David Kretschmer</u> |
| Daniel Patrick Corcoran | Kathleen Susan Kiefer | Robert David Kretschmer |
| President | Secretary | Treasurer |

Subscribed and sworn to before me this 9th day of May, 2017
Sharon W. Berry

SHARON W. BERRY
Notary Public, Maine
My Commission Expires January 8, 2024

a. Is this an original filing? Yes [X] No []
b. If no,
1. State the amendment number.....
2. Date filed.....
3. Number of pages attached.....

STATEMENT AS OF MARCH 31, 2017 OF THE Anthem Health Plans of Maine, Inc.

ASSETS

| | Current Statement Date | | | 4 December 31 Prior Year Net Admitted Assets |
|---|------------------------|-------------------------|---|---|
| | 1 Assets | 2 Nonadmitted Assets | 3 Net Admitted Assets (Cols. 1 - 2) | |
| 1. Bonds | 191,982,194 | 0 | 191,982,194 | 190,140,929 |
| 2. Stocks: | | | | |
| 2.1 Preferred stocks | | | 0 | |
| 2.2 Common stocks | | | 0 | |
| 3. Mortgage loans on real estate: | | | | |
| 3.1 First liens | | | 0 | |
| 3.2 Other than first liens..... | | | 0 | |
| 4. Real estate: | | | | |
| 4.1 Properties occupied by the company (less \$ encumbrances) | 72,500 | 0 | 72,500 | 72,500 |
| 4.2 Properties held for the production of income (less \$ encumbrances) | | | 0 | |
| 4.3 Properties held for sale (less \$ encumbrances) | | | 0 | |
| 5. Cash (\$17,656,501), cash equivalents (\$) and short-term investments (\$1,545,768) | 19,202,269 | | 19,202,269 | (6,584,704) |
| 6. Contract loans (including \$ premium notes) | | | 0 | |
| 7. Derivatives | | | 0 | |
| 8. Other invested assets | 136,778 | | 136,778 | 137,985 |
| 9. Receivables for securities | | | 0 | 0 |
| 10. Securities lending reinvested collateral assets | 11,307,974 | | 11,307,974 | 10,485,136 |
| 11. Aggregate write-ins for invested assets | 0 | 0 | 0 | 0 |
| 12. Subtotals, cash and invested assets (Lines 1 to 11) | 222,701,715 | 0 | 222,701,715 | 194,251,846 |
| 13. Title plants less \$ charged off (for Title insurers only) | | | 0 | |
| 14. Investment income due and accrued | 1,671,589 | 0 | 1,671,589 | 1,918,912 |
| 15. Premiums and considerations: | | | | |
| 15.1 Uncollected premiums and agents' balances in the course of collection | 36,621,432 | 2,563,068 | 34,058,364 | 24,287,491 |
| 15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$19,837,256 earned but unbilled premiums) | 19,837,256 | 0 | 19,837,256 | 19,330,696 |
| 15.3 Accrued retrospective premiums (\$1,530,883) and contracts subject to redetermination (\$1,213,295) | 2,744,178 | 0 | 2,744,178 | 939,890 |
| 16. Reinsurance: | | | | |
| 16.1 Amounts recoverable from reinsurers | 3,173,889 | 0 | 3,173,889 | 3,561,289 |
| 16.2 Funds held by or deposited with reinsured companies | | | 0 | |
| 16.3 Other amounts receivable under reinsurance contracts | | | 0 | |
| 17. Amounts receivable relating to uninsured plans | 29,393,052 | 5,014,790 | 24,378,262 | 23,554,924 |
| 18.1 Current federal and foreign income tax recoverable and interest thereon | | | 0 | 466,393 |
| 18.2 Net deferred tax asset | 16,249,118 | 3,515,890 | 12,733,228 | 14,338,608 |
| 19. Guaranty funds receivable or on deposit | 186,773 | 0 | 186,773 | |
| 20. Electronic data processing equipment and software | | | 0 | |
| 21. Furniture and equipment, including health care delivery assets (\$) | 1,493,226 | 1,493,226 | 0 | 0 |
| 22. Net adjustment in assets and liabilities due to foreign exchange rates | | | 0 | |
| 23. Receivables from parent, subsidiaries and affiliates | 6,859,951 | 0 | 6,859,951 | 13,705,761 |
| 24. Health care (\$62,850,034) and other amounts receivable | 72,369,847 | 9,519,813 | 62,850,034 | 51,973,655 |
| 25. Aggregate write-ins for other than invested assets | 64,328,611 | 748,028 | 63,580,583 | 60,076,650 |
| 26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25) | 477,630,637 | 22,854,815 | 454,775,822 | 408,406,115 |
| 27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts | | | 0 | |
| 28. Total (Lines 26 and 27) | 477,630,637 | 22,854,815 | 454,775,822 | 408,406,115 |
| DETAILS OF WRITE-INS | | | | |
| 1101. | | | | |
| 1102. | | | | |
| 1103. | | | | |
| 1198. Summary of remaining write-ins for Line 11 from overflow page | 0 | 0 | 0 | 0 |
| 1199. Totals (Lines 1101 through 1103 plus 1198)(Line 11 above) | 0 | 0 | 0 | 0 |
| 2501. FEP Assets Held By Agent | 63,426,443 | 0 | 63,426,443 | 59,937,916 |
| 2502. Miscellaneous Receivables | 156,102 | 1,962 | 154,140 | 138,734 |
| 2503. Prepaid Expenses | 746,066 | 746,066 | 0 | 0 |
| 2598. Summary of remaining write-ins for Line 25 from overflow page | 0 | 0 | 0 | 0 |
| 2599. Totals (Lines 2501 through 2503 plus 2598)(Line 25 above) | 64,328,611 | 748,028 | 63,580,583 | 60,076,650 |

LIABILITIES, CAPITAL AND SURPLUS

| | Current Period | | | Prior Year |
|--|----------------|----------------|-------------|-------------|
| | 1 Covered | 2 Uncovered | 3 Total | 4 Total |
| 1. Claims unpaid (less \$28,454 reinsurance ceded) | 103,522,040 | 1,594,448 | 105,116,488 | 111,048,559 |
| 2. Accrued medical incentive pool and bonus amounts | 1,987,508 | | 1,987,508 | 1,886,261 |
| 3. Unpaid claims adjustment expenses | 2,719,292 | | 2,719,292 | 2,751,333 |
| 4. Aggregate health policy reserves, including the liability of \$0 for medical loss ratio rebate per the Public Health Service Act | 95,506,943 | | 95,506,943 | 83,937,745 |
| 5. Aggregate life policy reserves | | | 0 | 0 |
| 6. Property/casualty unearned premium reserve | | | 0 | |
| 7. Aggregate health claim reserves | 73,442 | | 73,442 | 73,893 |
| 8. Premiums received in advance | 18,328,847 | | 18,328,847 | 8,426,416 |
| 9. General expenses due or accrued | 6,477,286 | | 6,477,286 | 5,473,551 |
| 10.1 Current federal and foreign income tax payable and interest thereon (including \$ on realized gains (losses)) | 6,781,519 | | 6,781,519 | |
| 10.2 Net deferred tax liability | | | 0 | |
| 11. Ceded reinsurance premiums payable | | | 0 | |
| 12. Amounts withheld or retained for the account of others..... | 206,387 | | 206,387 | 253,753 |
| 13. Remittances and items not allocated | 18,885,941 | | 18,885,941 | 7,016,160 |
| 14. Borrowed money (including \$ current) and interest thereon \$ (including \$ current) | | | 0 | |
| 15. Amounts due to parent, subsidiaries and affiliates | 9,388 | | 9,388 | 6,736,960 |
| 16. Derivatives | | | 0 | |
| 17. Payable for securities | 708,969 | | 708,969 | |
| 18. Payable for securities lending | 11,307,974 | | 11,307,974 | 10,485,136 |
| 19. Funds held under reinsurance treaties (with \$ authorized reinsurers, \$ unauthorized reinsurers and \$ certified reinsurers)..... | | | 0 | |
| 20. Reinsurance in unauthorized and certified (\$) companies | | | 0 | |
| 21. Net adjustments in assets and liabilities due to foreign exchange rates | | | 0 | |
| 22. Liability for amounts held under uninsured plans | 10,705,019 | | 10,705,019 | 11,596,525 |
| 23. Aggregate write-ins for other liabilities (including \$2,605,812 current) | 8,092,731 | 0 | 8,092,731 | 8,271,894 |
| 24. Total liabilities (Lines 1 to 23) | 285,313,286 | 1,594,448 | 286,907,734 | 257,958,186 |
| 25. Aggregate write-ins for special surplus funds | XXX | XXX | 18,652,903 | 13,636,709 |
| 26. Common capital stock | XXX | XXX | 2,500,000 | 2,500,000 |
| 27. Preferred capital stock | XXX | XXX | | |
| 28. Gross paid in and contributed surplus | XXX | XXX | 120,652,900 | 120,652,900 |
| 29. Surplus notes | XXX | XXX | | |
| 30. Aggregate write-ins for other than special surplus funds | XXX | XXX | 0 | 0 |
| 31. Unassigned funds (surplus) | XXX | XXX | 26,062,285 | 13,658,320 |
| 32. Less treasury stock, at cost: | | | | |
| 32.1 shares common (value included in Line 26 \$) | XXX | XXX | | |
| 32.2 shares preferred (value included in Line 27 \$) | XXX | XXX | | |
| 33. Total capital and surplus (Lines 25 to 31 minus Line 32) | XXX | XXX | 167,868,088 | 150,447,929 |
| 34. Total liabilities, capital and surplus (Lines 24 and 33) | XXX | XXX | 454,775,822 | 408,406,115 |
| DETAILS OF WRITE-INS | | | | |
| 2301. FEP Special Advance | 3,713,380 | | 3,713,380 | 3,713,380 |
| 2302. Escheat Liability | 1,898,141 | | 1,898,141 | 1,851,039 |
| 2303. Other Premium Liability | 1,351,053 | | 1,351,053 | 1,086,455 |
| 2398. Summary of remaining write-ins for Line 23 from overflow page | 1,130,157 | 0 | 1,130,157 | 1,621,020 |
| 2399. Totals (Lines 2301 through 2303 plus 2398)(Line 23 above) | 8,092,731 | 0 | 8,092,731 | 8,271,894 |
| 2501. Estimated ACA Health Insurer Fee | XXX | XXX | 5,338,403 | 0 |
| 2502. Deferred gain on sale-leaseback transaction | XXX | XXX | 13,314,500 | 13,636,709 |
| 2503. | XXX | XXX | | |
| 2598. Summary of remaining write-ins for Line 25 from overflow page | XXX | XXX | 0 | 0 |
| 2599. Totals (Lines 2501 through 2503 plus 2598)(Line 25 above) | XXX | XXX | 18,652,903 | 13,636,709 |
| 3001. | XXX | XXX | | |
| 3002. | XXX | XXX | | |
| 3003. | XXX | XXX | | |
| 3098. Summary of remaining write-ins for Line 30 from overflow page | XXX | XXX | 0 | 0 |
| 3099. Totals (Lines 3001 through 3003 plus 3098)(Line 30 above) | XXX | XXX | 0 | 0 |

STATEMENT OF REVENUE AND EXPENSES

| | Current Year To Date | | Prior Year To Date | Prior Year Ended December 31 |
|--|-------------------------|-------------|-----------------------|---------------------------------|
| | 1 Uncovered | 2 Total | 3 Total | 4 Total |
| 1. Member Months | XXX | 1,177,214 | 965,153 | 4,216,388 |
| 2. Net premium income (including \$0 non-health premium income)..... | XXX | 296,523,415 | 261,065,897 | 1,066,001,267 |
| 3. Change in unearned premium reserves and reserve for rate credits..... | XXX | (8,915,252) | 4,102,273 | (3,123,562) |
| 4. Fee-for-service (net of \$0 medical expenses)..... | XXX | | | |
| 5. Risk revenue | XXX | | | |
| 6. Aggregate write-ins for other health care related revenues | XXX | 0 | 0 | 0 |
| 7. Aggregate write-ins for other non-health revenues | XXX | 0 | 0 | 0 |
| 8. Total revenues (Lines 2 to 7) | XXX | 287,608,163 | 265,168,170 | 1,062,877,705 |
| Hospital and Medical: | | | | |
| 9. Hospital/medical benefits | 2,806,748 | 185,089,339 | 169,482,076 | 709,057,902 |
| 10. Other professional services | 35,706 | 2,354,589 | 2,336,585 | 9,844,168 |
| 11. Outside referrals | | | | |
| 12. Emergency room and out-of-area | 95,716 | 6,311,922 | 7,691,714 | 29,614,006 |
| 13. Prescription drugs | 675,327 | 44,534,025 | 42,951,800 | 181,193,824 |
| 14. Aggregate write-ins for other hospital and medical | 0 | 0 | 0 | 0 |
| 15. Incentive pool, withhold adjustments and bonus amounts | | 1,937,646 | 1,472,296 | 4,876,968 |
| 16. Subtotal (Lines 9 to 15) | 3,613,497 | 240,227,521 | 223,934,471 | 934,586,868 |
| Less: | | | | |
| 17. Net reinsurance recoveries | | 12,684 | 697,030 | 3,526,833 |
| 18. Total hospital and medical (Lines 16 minus 17) | 3,613,497 | 240,214,837 | 223,237,441 | 931,060,035 |
| 19. Non-health claims (net) | | | | |
| 20. Claims adjustment expenses, including \$3,380,362 cost containment expenses | | 6,221,113 | 5,035,387 | 28,631,538 |
| 21. General administrative expenses | | 17,266,829 | 33,085,503 | 74,125,499 |
| 22. Increase in reserves for life and accident and health contracts (including \$ increase in reserves for life only) | | | (302,723) | (302,723) |
| 23. Total underwriting deductions (Lines 18 through 22)..... | 3,613,497 | 263,702,779 | 261,055,608 | 1,033,514,349 |
| 24. Net underwriting gain or (loss) (Lines 8 minus 23) | XXX | 23,905,384 | 4,112,562 | 29,363,356 |
| 25. Net investment income earned | | 1,461,368 | 1,546,364 | 6,230,806 |
| 26. Net realized capital gains (losses) less capital gains tax of \$34,150 | | 380,367 | 239,682 | 1,336,705 |
| 27. Net investment gains (losses) (Lines 25 plus 26) | 0 | 1,841,735 | 1,786,046 | 7,567,511 |
| 28. Net gain or (loss) from agents' or premium balances charged off [(amount recovered \$) (amount charged off \$10,483)]..... | | (10,483) | (260) | (343,335) |
| 29. Aggregate write-ins for other income or expenses | 0 | (308,483) | 18,931 | (178,723) |
| 30. Net income or (loss) after capital gains tax and before all other federal income taxes (Lines 24 plus 27 plus 28 plus 29) | XXX | 25,428,153 | 5,917,279 | 36,408,809 |
| 31. Federal and foreign income taxes incurred | XXX | 7,213,762 | 7,488,784 | 17,314,136 |
| 32. Net income (loss) (Lines 30 minus 31) | XXX | 18,214,391 | (1,571,505) | 19,094,673 |
| DETAILS OF WRITE-INS | | | | |
| 0601. | XXX | | | |
| 0602. | XXX | | | |
| 0603. | XXX | | | |
| 0698. Summary of remaining write-ins for Line 6 from overflow page | XXX | 0 | 0 | 0 |
| 0699. Totals (Lines 0601 through 0603 plus 0698)(Line 6 above) | XXX | 0 | 0 | 0 |
| 0701. | XXX | | | |
| 0702. | XXX | | | |
| 0703. | XXX | | | |
| 0798. Summary of remaining write-ins for Line 7 from overflow page | XXX | 0 | 0 | 0 |
| 0799. Totals (Lines 0701 through 0703 plus 0798)(Line 7 above) | XXX | 0 | 0 | 0 |
| 1401. | | | | |
| 1402. | | | | |
| 1403. | | | | |
| 1498. Summary of remaining write-ins for Line 14 from overflow page | 0 | 0 | 0 | 0 |
| 1499. Totals (Lines 1401 through 1403 plus 1498)(Line 14 above) | 0 | 0 | 0 | 0 |
| 2901. Miscellaneous (expense) income | 0 | (308,483) | 18,931 | (178,723) |
| 2902. | | | | |
| 2903. | | | | |
| 2998. Summary of remaining write-ins for Line 29 from overflow page | 0 | 0 | 0 | 0 |
| 2999. Totals (Lines 2901 through 2903 plus 2998)(Line 29 above) | 0 | (308,483) | 18,931 | (178,723) |

STATEMENT OF REVENUE AND EXPENSES (Continued)

| | 1 Current Year to Date | 2 Prior Year to Date | 3 Prior Year Ended December 31 |
|---|------------------------------|----------------------------|--------------------------------------|
| CAPITAL AND SURPLUS ACCOUNT | | | |
| 33. Capital and surplus prior reporting year..... | 150,447,929 | 154,005,390 | 154,005,390 |
| 34. Net income or (loss) from Line 32 | 18,214,391 | (1,571,505) | 19,094,673 |
| 35. Change in valuation basis of aggregate policy and claim reserves | | | |
| 36. Change in net unrealized capital gains (losses) less capital gains tax of \$(423) | (784) | 0 | (3,941) |
| 37. Change in net unrealized foreign exchange capital gain or (loss) | | | |
| 38. Change in net deferred income tax | (2,001,250) | (1,364,700) | (1,081,941) |
| 39. Change in nonadmitted assets | 1,530,011 | 3,235,221 | 1,822,583 |
| 40. Change in unauthorized and certified reinsurance | 0 | 0 | |
| 41. Change in treasury stock | 0 | 0 | |
| 42. Change in surplus notes | 0 | 0 | |
| 43. Cumulative effect of changes in accounting principles..... | | | |
| 44. Capital Changes: | | | |
| 44.1 Paid in | 0 | 0 | |
| 44.2 Transferred from surplus (Stock Dividend)..... | 0 | 0 | |
| 44.3 Transferred to surplus..... | | | |
| 45. Surplus adjustments: | | | |
| 45.1 Paid in | 0 | 0 | |
| 45.2 Transferred to capital (Stock Dividend) | | | |
| 45.3 Transferred from capital | | 0 | |
| 46. Dividends to stockholders | | | (22,100,000) |
| 47. Aggregate write-ins for gains or (losses) in surplus | (322,209) | (322,209) | (1,288,835) |
| 48. Net change in capital & surplus (Lines 34 to 47) | 17,420,159 | (23,193) | (3,557,461) |
| 49. Capital and surplus end of reporting period (Line 33 plus 48) | 167,868,088 | 153,982,197 | 150,447,929 |
| DETAILS OF WRITE-INS | | | |
| 4701. Deferred gain on sale-leaseback transaction | (322,209) | (322,209) | (1,288,835) |
| 4702. | | | |
| 4703. | | | |
| 4798. Summary of remaining write-ins for Line 47 from overflow page | 0 | 0 | 0 |
| 4799. Totals (Lines 4701 through 4703 plus 4798)(Line 47 above) | (322,209) | (322,209) | (1,288,835) |

CASH FLOW

| | 1 Current Year To Date | 2 Prior Year To Date | 3 Prior Year Ended December 31 |
|---|------------------------------|----------------------------|--------------------------------------|
| Cash from Operations | | | |
| 1. Premiums collected net of reinsurance | 296,369,478 | 260,394,977 | 1,059,441,583 |
| 2. Net investment income | 1,900,781 | 2,102,981 | 7,550,298 |
| 3. Miscellaneous income | 0 | 0 | |
| 4. Total (Lines 1 to 3) | 298,270,259 | 262,497,958 | 1,066,991,881 |
| 5. Benefit and loss related payments | 245,658,712 | 226,289,834 | 919,065,406 |
| 6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts | | | |
| 7. Commissions, expenses paid and aggregate write-ins for deductions | 24,228,004 | 21,583,755 | 108,456,524 |
| 8. Dividends paid to policyholders | | | |
| 9. Federal and foreign income taxes paid (recovered) net of \$ 34,150 tax on capital gains (losses) | 0 | 0 | 17,296,148 |
| 10. Total (Lines 5 through 9) | 269,886,716 | 247,873,589 | 1,044,818,078 |
| 11. Net cash from operations (Line 4 minus Line 10) | 28,383,543 | 14,624,369 | 22,173,803 |
| Cash from Investments | | | |
| 12. Proceeds from investments sold, matured or repaid: | | | |
| 12.1 Bonds | 12,616,806 | 14,663,696 | 73,286,515 |
| 12.2 Stocks | 0 | 0 | |
| 12.3 Mortgage loans | 0 | 0 | |
| 12.4 Real estate | 0 | 0 | 0 |
| 12.5 Other invested assets | 0 | 0 | |
| 12.6 Net gains or (losses) on cash, cash equivalents and short-term investments | 0 | 0 | |
| 12.7 Miscellaneous proceeds | 708,969 | 2,951,221 | 1,092,860 |
| 12.8 Total investment proceeds (Lines 12.1 to 12.7) | 13,325,775 | 17,614,917 | 74,379,375 |
| 13. Cost of investments acquired (long-term only): | | | |
| 13.1 Bonds | 14,562,111 | 18,756,164 | 58,580,962 |
| 13.2 Stocks | 0 | 0 | |
| 13.3 Mortgage loans | 0 | 0 | |
| 13.4 Real estate | 0 | 0 | 0 |
| 13.5 Other invested assets | 0 | 0 | |
| 13.6 Miscellaneous applications | 822,838 | 0 | 0 |
| 13.7 Total investments acquired (Lines 13.1 to 13.6) | 15,384,949 | 18,756,164 | 58,580,962 |
| 14. Net increase (or decrease) in contract loans and premium notes | 0 | 0 | |
| 15. Net cash from investments (Line 12.8 minus Line 13.7 and Line 14) | (2,059,174) | (1,141,247) | 15,798,413 |
| Cash from Financing and Miscellaneous Sources | | | |
| 16. Cash provided (applied): | | | |
| 16.1 Surplus notes, capital notes | 0 | 0 | |
| 16.2 Capital and paid in surplus, less treasury stock | 0 | 0 | |
| 16.3 Borrowed funds | 0 | 0 | |
| 16.4 Net deposits on deposit-type contracts and other insurance liabilities | 0 | 0 | |
| 16.5 Dividends to stockholders | 0 | 0 | 22,100,000 |
| 16.6 Other cash provided (applied) | (537,396) | 5,347,383 | 1,224,839 |
| 17. Net cash from financing and miscellaneous sources (Line 16.1 through Line 16.4 minus Line 16.5 plus Line 16.6) | (537,396) | 5,347,383 | (20,875,161) |
| RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS | | | |
| 18. Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17) .. | 25,786,973 | 18,830,505 | 17,097,055 |
| 19. Cash, cash equivalents and short-term investments: | | | |
| 19.1 Beginning of year | (6,584,704) | (23,681,759) | (23,681,759) |
| 19.2 End of period (Line 18 plus Line 19.1) | 19,202,269 | (4,851,254) | (6,584,704) |

Note: Supplemental disclosures of cash flow information for non-cash transactions:

| | | | |
|---------------|--|--|--|
| 20.0001. | | | |
|---------------|--|--|--|

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION

| | 1 Total | Comprehensive (Hospital & Medical) | | 4 Medicare Supplement | 5 Vision Only | 6 Dental Only | 7 Federal Employees Health Benefit Plan | 8 Title XVIII Medicare | 9 Title XIX Medicaid | 10 Other |
|--|----------------|---------------------------------------|----------------|---------------------------------|-------------------------|-------------------------|---|----------------------------------|--------------------------------|-----------------|
| | | 2 Individual | 3 Group | | | | | | | |
| Total Members at end of: | | | | | | | | | | |
| 1. Prior Year | 379,610 | 20,343 | 113,424 | 20,412 | 136,837 | 19,333 | 36,251 | 2,767 | 0 | 30,243 |
| 2. First Quarter | 392,549 | 28,955 | 111,576 | 20,298 | 138,476 | 21,716 | 36,286 | 3,085 | 0 | 32,157 |
| 3. Second Quarter | 0 | | | | | | | | | |
| 4. Third Quarter | 0 | | | | | | | | | |
| 5. Current Year | 0 | | | | | | | | | |
| 6. Current Year Member Months | 1,177,214 | 84,754 | 335,898 | 61,194 | 415,833 | 64,876 | 108,926 | 8,954 | 0 | 96,779 |
| Total Member Ambulatory Encounters for Period: | | | | | | | | | | |
| 7. Physician | 380,072 | 42,473 | 218,192 | 55,544 | | | 51,755 | 12,108 | | |
| 8. Non-Physician | 242,799 | 12,225 | 76,270 | 82,935 | | | 51,574 | 19,795 | | |
| 9. Total | 622,871 | 54,698 | 294,462 | 138,479 | 0 | 0 | 103,329 | 31,903 | 0 | 0 |
| 10. Hospital Patient Days Incurred | 18,455 | 2,227 | 6,681 | 5,353 | | | 2,683 | 1,511 | | |
| 11. Number of Inpatient Admissions | 4,007 | 412 | 1,600 | 1,145 | | | 629 | 221 | | |
| 12. Health Premiums Written (a) | 296,537,930 | 38,606,172 | 175,511,673 | 13,019,140 | 1,766,115 | 1,942,444 | 54,491,011 | 9,180,454 | 0 | 2,020,921 |
| 13. Life Premiums Direct | 0 | | | | | | | | | |
| 14. Property/Casualty Premiums Written | 0 | | | | | | | | | |
| 15. Health Premiums Earned | 287,622,678 | 38,606,172 | 170,539,076 | 12,281,003 | 1,766,012 | 2,023,271 | 51,002,483 | 9,383,740 | 0 | 2,020,921 |
| 16. Property/Casualty Premiums Earned | 0 | | | | | | | | | |
| 17. Amount Paid for Provision of Health Care Services..... | 246,417,901 | 25,103,330 | 139,070,275 | 23,208,255 | 1,422,203 | 1,354,139 | 47,496,115 | 7,427,691 | 0 | 1,335,893 |
| 18. Amount Incurred for Provision of Health Care Services | 240,227,521 | 23,058,294 | 146,467,810 | 9,986,444 | 1,446,664 | 1,356,331 | 47,977,877 | 8,165,077 | 0 | 1,769,024 |

(a) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ 9,180,454

STATEMENT AS OF MARCH 31, 2017 OF THE Anthem Health Plans of Maine, Inc.

CLAIMS UNPAID AND INCENTIVE POOL, WITHHOLD AND BONUS (Reported and Unreported)

[illegible]

oo

UNDERWRITING AND INVESTMENT EXHIBIT

ANALYSIS OF CLAIMS UNPAID - PRIOR YEAR - NET OF REINSURANCE

| Line of Business | Claims Paid Year to Date | | Liability End of Current Quarter | | 5 Claims Incurred in Prior Years (Columns 1 + 3) | 6 Estimated Claim Reserve and Claim Liability December 31 of Prior Year |
|---|---|---|--|---|---|--|
| | 1 On Claims Incurred Prior to January 1 of Current Year | 2 On Claims Incurred During the Year | 3 On Claims Unpaid Dec. 31 of Prior Year | 4 On Claims Incurred During the Year | | |
| 1. Comprehensive (hospital and medical) | 66,235,467 | 111,438,001 | 6,396,125 | 67,583,395 | 72,631,592 | 68,399,937 |
| 2. Medicare Supplement | 18,255,730 | 5,468,071 | 518,248 | 5,534,804 | 18,773,978 | 19,274,868 |
| 3. Dental Only | 189,259 | 1,167,006 | 71,993 | 322,432 | 261,252 | 392,232 |
| 4. Vision Only | 285,282 | 1,136,921 | 12,851 | 337,089 | 298,133 | 325,478 |
| 5. Federal Employees Health Benefits Plan | 18,283,809 | 28,957,488 | 1,251,510 | 17,978,801 | 19,535,319 | 18,739,679 |
| 6. Title XVIII - Medicare | 2,893,029 | 5,611,992 | 760,215 | 3,510,801 | 3,653,244 | 3,511,722 |
| 7. Title XIX - Medicaid | 0 | 0 | 0 | 0 | 0 | 0 |
| 8. Other health | 681,743 | 654,150 | 31,855 | 879,811 | 713,598 | 478,536 |
| 9. Health subtotal (Lines 1 to 8) | 106,824,319 | 154,433,629 | 9,042,797 | 96,147,133 | 115,867,116 | 111,122,452 |
| 10. Healthcare receivables (a) | 9,580,606 | 7,467,629 | 0 | 0 | 9,580,606 | 0 |
| 11. Other non-health | 0 | 0 | 0 | 0 | 0 | 0 |
| 12. Medical incentive pools and bonus amounts | 383,587 | 1,452,812 | 1,502,801 | 484,707 | 1,886,388 | 1,886,261 |
| 13. Totals (Lines 9-10+11+12) | 97,627,300 | 148,418,812 | 10,545,598 | 96,631,840 | 108,172,898 | 113,008,713 |

(a) Excludes \$ 55,321,612 loans or advances to providers not yet expensed.

NOTES TO FINANCIAL STATEMENTS

For the purposes of the quarterly interim financial information, it is presumed that the users of the interim financial information have read or have access to the Annual Statement as of December 31, 2016. This presentation addresses only significant events occurring since the last Annual Statement.

1. Summary of Significant Accounting Policies and Going Concern

A. Accounting Practices

The accompanying financial statements of Anthem Health Plans of Maine, Inc. (the “Company”) have been prepared in conformity with the National Association of Insurance Commissioners’ (“NAIC”) *Annual Statement Instructions* and in accordance with accounting practices prescribed by the NAIC *Accounting Practices and Procedures Manual* (“NAIC SAP”), subject to any deviations prescribed or permitted by the Maine Bureau of Insurance (the “Bureau”).

A reconciliation of the Company’s net income and capital and surplus between NAIC SAP and practices prescribed and permitted by the Bureau is shown below:

| | SSAP # | F/S Page | F/S Line # | March 31, 2017 | December 31, 2016 |
|--|--------|----------|------------|----------------|-------------------|
| <u>Net Income</u> | | | | | |
| (1) MAINE state basis (Page 4, Line 32, Columns 2 & 4) | XXX | XXX | XXX | \$ 18,214,391 | \$ 19,094,673 |
| (2) State Prescribed Practices that is an increase/(decrease) from NAIC SAP: | | | | — | — |
| (3) State Permitted Practices that is an increase/(decrease) from NAIC SAP: | | | | — | — |
| (4) NAIC SAP (1-2-3=4) | XXX | XXX | XXX | \$ 18,214,391 | \$ 19,094,673 |
| <u>Surplus</u> | | | | | |
| (5) MAINE state basis (Page 3, Line 33, Columns 3 & 4) | XXX | XXX | XXX | \$167,868,088 | \$150,447,929 |
| (6) State Prescribed Practices that is an increase/(decrease) from NAIC SAP: | | | | — | — |
| (7) State Permitted Practices that is an increase/(decrease) from NAIC SAP: | | | | — | — |
| (8) NAIC SAP (5-6-7=8) | XXX | XXX | XXX | \$167,868,088 | \$150,447,929 |

B. Use of Estimates in the Preparation of the Financial Statements

No significant change.

C. Accounting Policies

(1) - (5) No significant change.

NOTES TO FINANCIAL STATEMENTS

(6) Loan-backed securities are stated at amortized cost. Pre-payment assumptions for loan-backed securities and structured securities were obtained from broker-dealer survey values or internal estimates. These assumptions are consistent with the current interest rate and economic environment. The retrospective adjustment method is used to value all loan-backed securities. Non-investment grade loan-backed securities are stated at the lower of amortized cost or fair value.

(7) - (15) No significant change.

D. Going Concern

Not applicable.

2. Accounting Changes and Corrections of Errors

Not applicable.

3. Business Combinations and Goodwill

Not applicable.

4. Discontinued Operations

Not applicable.

5. Investments

A. - C.

Not applicable.

D. Loan-Backed Securities

(1) Prepayment assumptions for single-class and multi-class mortgage-backed and asset-backed securities were obtained from broker-dealer survey values or internal estimates. The Company used various third-party pricing sources in determining the market value of its loan-backed securities.

(2) The Company did not recognize other-than-temporary impairments on its loan-backed securities during the three months ended March 31, 2017.

(3) The Company did not hold other-than-temporary impairments on its loan-backed securities at March 31, 2017.

(4) The Company had no impaired securities for which an other-than-temporary impairment had not been recognized in earnings as a realized loss at March 31, 2017.

(5) The Company had no impaired loan-backed securities at March 31, 2017.

D. Repurchase Agreements and/or Securities Lending Transactions

(1) Not applicable.

(2) No significant change.

NOTES TO FINANCIAL STATEMENTS

(3) Collateral Received

- a. No significant change.
- b. The fair value of that collateral and of the portion of that collateral that it has sold or repledged \$ 11,307,974
- c. No significant change.

- (4) Not applicable.
- (5) No significant change.
- (6) Not applicable.
- (7) Not applicable.

E. Real Estate

No significant change.

F. Investments in Low-Income Housing Tax Credits

No significant change.

G. Restricted Assets

No significant change.

H. Working Capital Finance Investments

Not applicable.

I. Offsetting and Netting of Assets and Liabilities

The Company did not have any offsetting or netting of assets and liabilities at March 31, 2017.

J. Structured Notes

Not applicable.

K. 5* Securities

The Company has no 5* Securities as of March 31, 2017.

6. Joint Ventures, Partnerships and Limited Liability Companies

No significant change.

7. Investment Income

No significant change.

8. Derivative Instruments

No significant change.

9. Income Taxes

No significant change.

NOTES TO FINANCIAL STATEMENTS

10. Information Concerning Parent, Subsidiaries, Affiliates and Other Related Parties

A. Nature of the Relationship

On July 24, 2015, the Company's ultimate parent company, Anthem, and Cigna Corporation ("Cigna") entered into an Agreement and Plan of Merger dated as of July 23, 2015, by and among Anthem, Cigna and Anthem Merger Sub Corp., a Delaware corporation and a direct wholly-owned subsidiary of Anthem, pursuant to which Anthem will acquire all outstanding shares of Cigna, or the Acquisition. On July 21, 2016, the U.S. Department of Justice, or DOJ, along with certain state attorneys general, filed a civil antitrust lawsuit in the U.S. District Court for the District of Columbia seeking to block the Acquisition. On January 18, 2017, Anthem provided notice to Cigna that Anthem had elected to extend the termination date under the Merger Agreement from January 31, 2017 until April 30, 2017. Following the conclusion of the trial, the Court ruled in favor of the DOJ, on February 8, 2017, and Anthem promptly filed notice that Anthem would appeal the Court's ruling. On February 14, 2017, Cigna purported to terminate the Merger Agreement and commenced litigation against Anthem in the Delaware Court of Chancery, or Delaware Court, seeking damages and a declaratory judgment that its purported termination of the Merger Agreement was lawful, among other claims. Anthem believes Cigna's allegations are without merit. Also on February 14, 2017, Anthem initiated its own litigation against Cigna in the Delaware Court seeking a temporary restraining order to enjoin Cigna from terminating the Merger Agreement, specific performance compelling Cigna to comply with the Merger Agreement and damages. On February 15, 2017, the Delaware Court granted Anthem's motion for a temporary restraining order and issued an order enjoining Cigna from terminating the Merger Agreement. The temporary restraining order became effective immediately and will remain in place pending any further order from the Delaware Court. On April 28, 2017, the U.S. District Court of Appeals upheld the ruling to block the Acquisition. On May 5, 2017, Anthem filed a petition for a writ of certiorari with the U.S. Supreme Court seeking a review of the majority opinion of the U.S. Circuit Court of Appeals for the District of Columbia affirming the ruling of the U.S. District Court for the District of Columbia. Anthem remains committed to completing the transaction.

B. - C.

No significant change.

D. Amounts Due to or from Related Parties

At March 31, 2017, the Company reported \$6,859,951 due from affiliates and \$9,388 due to affiliates. The receivable and payable balances represent intercompany transactions that will be settled in accordance with the settlement terms of the intercompany agreement.

E. - N.

No significant change.

11. Debt

Not applicable.

12. Retirement Plans, Deferred Compensation, Postemployment Benefits and Compensated Absences and Other Postretirement Benefit Plans

A. Defined Benefit Plan

Not applicable.

NOTES TO FINANCIAL STATEMENTS

B. Not applicable.

C. Not applicable.

D. Not applicable.

E. Defined Contribution Plans

Not applicable.

F. Multiemployer Plans

The Company does not participate in a multiemployer plan.

G. Consolidated/Holding Company Plans

No significant change.

H. Post Employment Benefits and Compensated Absences

Not applicable.

I. Impact of Medicare Modernization Act on Postretirement Benefits (INT 04-17)

Not applicable.

13. Capital and Surplus, Shareholders' Dividend Restrictions and Quasi-Reorganizations

No significant change.

14. Liabilities, Contingencies and Assessments

A. Contingent Commitments

No significant change.

B. Assessments

The National Organization of Life & Health Insurance Guaranty Associations, or NOLHGA, is a voluntary organization consisting of the state life and health insurance guaranty associations located throughout the U.S. Such associations, working together with NOLHGA, provide a safety net for their state's policyholders, ensuring that they continue to receive coverage, subject to state maximum limits, even if their insurer is declared insolvent. On March 1, 2017, long term care insurance writers Penn Treaty Network America Insurance Company and its subsidiary, American Network Insurance Company (collectively Penn Treaty), were ordered to be liquidated by the Pennsylvania state court which had jurisdiction over the Penn Treaty rehabilitation proceeding. We and other insurers will be obligated to pay a portion of their policyholder claims through state guaranty association assessments in future periods. In accordance with NAIC SAP guidance, the ultimate amount of the assessments was recognized as an expense in the period in which a court ordered liquidation was entered.

At March 31, 2017, the Company's portion of the assessments for the Penn Treaty insolvency was \$352,778, and in accordance with NAIC SAP guidance, the amount of the assessments were recognized as an expense. The Company has a guaranty fund payable of \$185,632 as of March 31, 2017. The liability was discounted using a rate of 3.5%. The amount of the undiscounted liability was \$246,753. Payment of the assessments will be largely recovered

NOTES TO FINANCIAL STATEMENTS

through premium tax credits over future years. The Company recorded an asset of \$186,773 related to these recoverables. The asset was discounted using a rate of 3.5%. The amount of the undiscounted asset was \$212,598.

The number of jurisdictions, the range of years and weighted average number of years of the guaranty fund payables and recoverables, as of March 31, 2017, is as follows:

| Name of the Insolvency | Payables | | | Recoverables | | |
|---|-------------------------|----------------|---------------------------|-------------------------|----------------|---------------------------|
| | Number of jurisdictions | Range of years | Weighted average of years | Number of jurisdictions | Range of years | Weighted average of years |
| Penn Treaty Network America Insurance Company | 1 | 1-21 | 5.5 | 1 | 2-27 | 9.0 |

C.- F.

No significant change.

15. Leases

No significant change.

16. Information About Financial Instruments With Off-Balance Sheet Risk and Financial Instruments With Concentrations of Credit Risk

No significant change.

17. Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities

A. Transfers of Receivables Reported as Sales

No significant change.

B. Transfer and Servicing of Financial Assets

(1) No significant change.

(2) - (7) Not applicable.

C. Wash Sales

(1) In the course of the Company’s asset management, securities may be sold and reacquired within 30 days of the sale date to enhance the yield on the investments.

(2) At March 31, 2017, there were no wash sales involving securities with an NAIC designation of 3 or below or unrated.

18. Gain or Loss to the Reporting Entity from Uninsured Plans and the Uninsured Portion of Partially Insured Plans

A. Administrative Services Only Plans

No significant change.

NOTES TO FINANCIAL STATEMENTS

B. Administrative Services Contract Plans

No significant change.

C. Medicare or Other Similarly Structured Cost-Based Reimbursement Contract

No significant change.

19. Direct Premium Written/Produced by Managing General Agents/Third Party Administrators

Not applicable.

20. Fair Value Measurements

A.

(1) Fair Value Measurement at Reporting Date

There are no assets or liabilities measured at fair value as of March 31, 2017.

(2) Fair Value Measurement in (Level 3) of the Fair Value Hierarchy

There are no investments in Level 3 as of March 31, 2017.

(3) The Company's policy is to recognize transfers between Levels, if any, as of the beginning of the reporting period.

(4) Fair values of fixed maturity securities are based on quoted market prices, where available. These fair values are obtained primarily from third party pricing services, which generally use Level 1 or Level 2 inputs, for the determination of fair value to facilitate fair value measurements and disclosures. United States government securities represent Level 1 securities, while Level 2 securities primarily include corporate securities, securities from states, municipalities and political subdivisions and residential mortgage-backed securities. For Securities not actively traded, the third party pricing services may use quoted market prices of comparable instruments or discounted cash flow analyses, incorporating inputs that are currently observable in the markets for similar securities. Inputs that are often used in the valuation methodologies include, but are not limited to, broker quotes, benchmark yields, credit spreads, default rates and prepayment speeds.

Fair values of equity securities are generally designated as Level 1 and are based on quoted market prices. For certain equity securities, quoted market prices for the identical security are not always available and the fair value is estimated by reference to similar securities for which quoted prices are available. These securities are designated Level 2. The Company has certain equity securities, including private equity securities, for which the fair value is estimated based on each security's current condition and future cash flow projections. Such securities are designated Level 3. The fair values of these private equity securities are generally based on either broker quotes or discounted cash flow projections using assumptions for inputs such as the weighted-average cost of capital, long-term revenue growth rates and earnings before interest, taxes, depreciation and amortization, or revenue multiples that are not observable in the markets.

NOTES TO FINANCIAL STATEMENTS

Certain financial assets are measured at fair value using Level 3 inputs, such as certain non-investment grade bonds and loan-backed securities or investments that are impaired during the year and recorded at fair value.

There have been no significant changes in the valuation techniques during the current period.

B. Fair Value Measurements Under Other Accounting Pronouncements

Not applicable.

C. Financial Instruments

| Type of Financial Instrument | Aggregate Fair Value | Admitted Assets | (Level 1) | (Level 2) | (Level 3) | Not Practicable (Carrying Value) |
|-------------------------------------|----------------------|-----------------|------------|----------------|-----------|----------------------------------|
| Bonds | \$ 195,060,639 | \$ 191,982,194 | \$ 152,285 | \$ 194,908,354 | \$ — | \$ — |
| Short-term investments | 1,545,768 | 1,545,768 | 1,545,768 | — | — | — |
| Securities lending collateral asset | 11,307,974 | 11,307,974 | 11,307,974 | — | — | — |

D. Not Practicable to Estimate Fair Value

Not applicable.

21. Other Items

No significant change.

22. Events Subsequent

Subsequent events have been considered through May 9, 2017 for the statutory statement issued on May 10, 2017. There were no events occurring subsequent to March 31, 2017 requiring recognition or disclosure.

23. Reinsurance

No significant change.

24. Retrospectively Rated Contracts & Contracts Subject to Redetermination

A. - D.

No significant change.

NOTES TO FINANCIAL STATEMENTS

E. Risk Sharing Provisions of the Affordable Care Act (“ACA”)

| | |
|---|----------------|
| (1) Did the reporting entity write accident and health insurance premium that is subject to the Affordable Care Act risk sharing provisions (YES/NO)? | Yes |
| (2) Impact of Risk-Sharing Provisions of the Affordable Care Act on Admitted Assets, Liabilities and Revenue for the Current Year | |
| a. Permanent ACA Risk Adjustment Program Assets | |
| Assets | |
| 1. Premium adjustments receivable due to ACA Risk Adjustment | \$ 357,589 |
| Liabilities | |
| 2. Risk adjustment user fees payable for ACA Risk Adjustment | \$ 56,451 |
| 3. Premium adjustments payable due to ACA Risk Adjustment | \$ 6,260,162 |
| Operations (Revenue & Expense) | |
| 4. Reported as revenue in premium for accident and health contracts (written/ collected) due to ACA Risk Adjustment | \$ (1,177,821) |
| 5. Reported in expenses as ACA risk adjustment user fees (incurred/paid) | \$ 15,767 |
| b. Transitional ACA Reinsurance Program | |
| Assets | |
| 1. Amounts recoverable for claims paid due to ACA Reinsurance | \$ 3,173,889 |
| 2. Amounts recoverable for claims unpaid due to ACA Reinsurance (contra liability) | \$ 28,454 |
| 3. Amounts receivable relating to uninsured plans for contributions for ACA Reinsurance | \$ — |
| Liabilities | |
| 4. Liabilities for contributions payable due to ACA Reinsurance - not reported as ceded premium | \$ 811,079 |
| 5. Ceded reinsurance premiums payable due to ACA Reinsurance | \$ — |
| 6. Liability for amounts held under uninsured plans contributions for ACA Reinsurance | \$ — |
| Operations (Revenue & Expense) | |
| 7. Ceded reinsurance premiums due to ACA Reinsurance | \$ — |
| 8. Reinsurance recoveries (income statement) due to ACA Reinsurance payments or expected payments | \$ 12,684 |
| 9. ACA Reinsurance contributions - not reported as ceded premium | \$ — |
| c. Temporary ACA Risk Corridors Program | |
| Assets | |
| 1. Accrued retrospective premium due to ACA Risk Corridors | \$ — |
| Liabilities | |
| 2. Reserve for rate credits or policy experience rating refunds due to ACA Risk Corridors | \$ — |
| Operations (Revenue & Expense) | |
| 3. Effect of ACA Risk Corridors on net premium income (paid/received) | \$ — |
| 4. Effect of ACA Risk Corridors on change in reserves for rate credits | \$ — |
| Line items where the amount is zero is due to no balance and/or no activity as of the reporting date. | |

NOTES TO FINANCIAL STATEMENTS

(3) Roll-forward of prior year ACA risk-sharing provisions for the following asset (gross of any nonadmission) and liability balances, along with the reasons for adjustments to prior year balance.

| | | Accrued During the Prior Year on Business Written Before December 31 of the Prior Year | | Received or Paid as of the Current Year on Business Written Before December 31 of the Prior Year | | Differences | | Adjustments | | | Unsettled Balances as of the Reporting Date | |
|--|--|--|--------------|--|-----------|--|--|------------------------|------------------------|-----|---|---|
| | | | | | | Prior Year Accrued Less Payments (Col 1 - 3) | Prior Year Accrued Less Payments (Col 2 - 4) | To Prior Year Balances | To Prior Year Balances | Ref | Cumulative Balance from Prior Years (Col 1 - 3 + 7) | Cumulative Balance from Prior Years (Col 2 - 4 + 8) |
| | | | | | | | | | | | | |
| | | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | Ref | 9 | 10 |
| | | Receivable | (Payable) | Receivable | (Payable) | Receivable | (Payable) | Receivable | (Payable) | | Receivable | (Payable) |
| a. Permanent ACA Risk Adjustment Program | | | | | | | | | | | | |
| 1. | Premium adjustments receivable | \$ 285,671 | \$ — | \$ — | \$ — | \$ 285,671 | \$ — | \$ (15,222) | \$ — | A | \$ 270,449 | \$ — |
| 2. | Premium adjustments (payable) | \$ — | \$ 5,010,423 | \$ — | \$ — | \$ — | \$ 5,010,423 | \$ — | \$ — | B | \$ — | \$ 5,010,423 |
| 3. | Subtotal ACA Permanent Risk Adjustment Program | \$ 285,671 | \$ 5,010,423 | \$ — | \$ — | \$ 285,671 | \$ 5,010,423 | \$ (15,222) | \$ — | | \$ 270,449 | \$ 5,010,423 |
| b. Transitional ACA Reinsurance Program | | | | | | | | | | | | |
| 1. | Amounts recoverable for claims paid | \$ 3,561,289 | \$ — | \$ 759,189 | \$ — | \$ 2,802,100 | \$ — | \$ 371,789 | \$ — | C | \$ 3,173,889 | \$ — |
| 2. | Amounts recoverable for claims unpaid (contra liability) | \$ 387,560 | \$ — | \$ — | \$ — | \$ 387,560 | \$ — | \$ (359,105) | \$ — | D | \$ 28,455 | \$ — |
| 3. | Amounts receivable relating to uninsured plans | \$ — | \$ — | \$ — | \$ — | \$ — | \$ — | \$ — | \$ — | E | \$ — | \$ — |
| 4. | Liabilities for contributions payable due to ACA Reinsurance - not reported as ceded premium | \$ — | \$ 811,079 | \$ — | \$ — | \$ — | \$ 811,079 | \$ — | \$ — | F | \$ — | \$ 811,079 |
| 5. | Ceded reinsurance premiums payable | \$ — | \$ — | \$ — | \$ — | \$ — | \$ — | \$ — | \$ — | G | \$ — | \$ — |
| 6. | Liability for amounts held under uninsured plans | \$ — | \$ — | \$ — | \$ — | \$ — | \$ — | \$ — | \$ — | H | \$ — | \$ — |
| 7. | Subtotal ACA Transitional Reinsurance Program | \$ 3,948,849 | \$ 811,079 | \$ 759,189 | \$ — | \$ 3,189,660 | \$ 811,079 | \$ 12,684 | \$ — | | \$ 3,202,344 | \$ 811,079 |
| c. Temporary ACA Risk Corridors Program | | | | | | | | | | | | |
| 1. | Accrued retrospective premium | \$ — | \$ — | \$ — | \$ — | \$ — | \$ — | \$ — | \$ — | I | \$ — | \$ — |
| 2. | Reserve for rate credits or policy experience rating refunds | \$ — | \$ — | \$ — | \$ — | \$ — | \$ — | \$ — | \$ — | J | \$ — | \$ — |
| 3. | Subtotal ACA Risk Corridors Program | \$ — | \$ — | \$ — | \$ — | \$ — | \$ — | \$ — | \$ — | | \$ — | \$ — |
| d. Total for ACA Risk Sharing Provisions | | | | | | | | | | | | |
| | | \$ 4,234,520 | \$ 5,821,502 | \$ 759,189 | \$ — | \$ 3,475,331 | \$ 5,821,502 | \$ (2,538) | \$ — | | \$ 3,472,793 | \$ 5,821,502 |

Explanations of adjustments

- A Adjustments are based upon experience to date, marketplace and annual information which includes patient encounter and diagnosis code data.
- B Not applicable.
- C Adjustments are based upon experience to date, coinsurance rate, attachment point and reinsurance cap.
- D Adjustments are based upon experience to date, coinsurance rate, attachment point and reinsurance cap.
- E Not applicable.
- F Not applicable.
- G Not applicable.
- H Not applicable.
- I Not applicable.
- J Not applicable.

NOTES TO FINANCIAL STATEMENTS

(4) Roll-Forward of Risk Corridors Asset and Liability Balances by Program Benefit Year.

| Risk Corridors Program Year | Accrued During the Prior Year on Business Written Before December 31 of the Prior Year | | Received or Paid as of the Current Year on Business Written Before December 31 of the Prior Year | | Differences | | Adjustments | | | Unsettled Balances as of the Reporting Date | |
|--|--|-----------|--|-----------|--|--|------------------------|------------------------|-----|---|---|
| | | | | | | | | | | | |
| | 1 | 2 | 3 | 4 | Prior Year Accrued Less Payments (Col 1 - 3) | Prior Year Accrued Less Payments (Col 2 - 4) | To Prior Year Balances | To Prior Year Balances | | Cumulative Balance from Prior Years (Col 1 - 3 + 7) | Cumulative Balance from Prior Years (Col 2 - 4 + 8) |
| | Receivable | (Payable) | Receivable | (Payable) | Receivable | (Payable) | Receivable | (Payable) | Ref | Receivable | (Payable) |
| a. 2014 | | | | | | | | | | | |
| 1. Accrued retrospective premium | \$ — | \$ — | \$ — | \$ — | \$ — | \$ — | \$ — | \$ — | A | \$ — | \$ — |
| 2. Reserve for rate credits for policy experience rating refunds | \$ — | \$ — | \$ — | \$ — | \$ — | \$ — | \$ — | \$ — | B | \$ — | \$ — |
| b. 2015 | | | | | | | | | | | |
| 1. Accrued retrospective premium | \$ — | \$ — | \$ — | \$ — | \$ — | \$ — | \$ — | \$ — | C | \$ — | \$ — |
| 2. Reserve for rate credits for policy experience rating refunds | \$ — | \$ — | \$ — | \$ — | \$ — | \$ — | \$ — | \$ — | D | \$ — | \$ — |
| c. 2016 | | | | | | | | | | | |
| 1. Accrued retrospective premium | \$ — | \$ — | \$ — | \$ — | \$ — | \$ — | \$ — | \$ — | E | \$ — | \$ — |
| 2. Reserve for rate credits for policy experience rating refunds | \$ — | \$ — | \$ — | \$ — | \$ — | \$ — | \$ — | \$ — | F | \$ — | \$ — |
| d. Total for Risk Corridors | \$ — | \$ — | \$ — | \$ — | \$ — | \$ — | \$ — | \$ — | | \$ — | \$ — |

Explanations of adjustments

- A Not applicable.
- B Not applicable.
- C Not applicable.
- D Not applicable.
- E Not applicable.
- F Not applicable.

24E(4)d (Columns 1 through 10) should equal 24E(3)c3 (Column 1 through 10 respectively)

(5) ACA Risk Corridors Receivable as of Reporting Date.

| Risk Corridors Program Year | 1 Estimated Amount to be Filed or Final Amount Filed with CMS | 2 Non-Accrued Amounts for Impairment or Other Reasons | 3 Amounts received from CMS | 4 Asset Balance (Gross of Non-admissions) (1 - 2 - 3) | 5 Non-admitted Amount | 6 Net Admitted Asset (4 - 5) |
|-----------------------------|--|--|--------------------------------|--|--------------------------|---------------------------------|
| a. 2014 | \$ — | \$ — | \$ — | \$ — | \$ — | \$ — |
| b. 2015 | \$ — | \$ — | \$ — | \$ — | \$ — | \$ — |
| c. 2016 | \$ 218,394 | \$ 218,394 | \$ — | \$ — | \$ — | \$ — |
| d. Total (a + b + c) | \$ 218,394 | \$ 218,394 | \$ — | \$ — | \$ — | \$ — |

24E(5)d (Columns 4) should equal 24E(3)c1 (Column 9)

24E(5)d (Columns 6) should equal 24E(2)c1

25. Change in Incurred Claims and Claim Adjustment Expenses

The estimated cost of claims and claim adjustment expense attributable to insured events of prior years decreased by \$4,846,660 during 2017. This is approximately 4.2% of unpaid claims and claim adjustment expenses of \$115,760,046 as of December 31, 2016. The redundancy reflects the decreases in estimated claims and claims adjustment expenses as a result of claims payment during the year, and as additional information is received regarding claims incurred prior to 2017. Recent claim development trends are also taken into account in evaluating the overall adequacy of unpaid claims and unpaid claim adjustment expense.

26. Intercompany Pooling Arrangements

Not applicable.

27. Structured Settlements

Not applicable.

NOTES TO FINANCIAL STATEMENTS

28. Health Care Receivables

No significant change.

29. Participating Policies

Not applicable.

30. Premium Deficiency Reserves

The Company did not record a premium deficiency reserve at March 31, 2017.

31. Anticipated Salvage and Subrogation

No significant change.

STATEMENT AS OF MARCH 31, 2017 OF THE Anthem Health Plans of Maine, Inc.

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

GENERAL

- 1.1

Did the reporting entity experience any material transactions requiring the filing of Disclosure of Material Transactions with the State of Domicile, as required by the Model Act?

Yes ☐ No ☒
- 1.2

If yes, has the report been filed with the domiciliary state?

Yes ☐ No ☐
- 2.1

Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity?

Yes ☐ No ☒
- 2.2

If yes, date of change:
- 3.1

Is the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated persons, one or more of which is an insurer?
If yes, complete Schedule Y, Parts 1 and 1A.

Yes ☒ No ☐
- 3.2

Have there been any substantial changes in the organizational chart since the prior quarter end?

Yes ☐ No ☒
- 3.3

If the response to 3.2 is yes, provide a brief description of those changes.
- 4.1

Has the reporting entity been a party to a merger or consolidation during the period covered by this statement?

Yes ☐ No ☒
- 4.2

If yes, provide the name of the entity, NAIC Company Code, and state of domicile (use two letter state abbreviation) for any entity that has ceased to exist as a result of the merger or consolidation.

| | | |
|---------------------|------------------------|------------------------|
| 1 Name of Entity | 2 NAIC Company Code | 3 State of Domicile |
| | | |
5.

If the reporting entity is subject to a management agreement, including third-party administrator(s), managing general agent(s), attorney-in-fact, or similar agreement, have there been any significant changes regarding the terms of the agreement or principals involved?
If yes, attach an explanation.

Yes ☐ No ☒ N/A ☐
- 6.1

State as of what date the latest financial examination of the reporting entity was made or is being made.

12/31/2013
- 6.2

State the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity. This date should be the date of the examined balance sheet and not the date the report was completed or released.

12/31/2013
- 6.3

State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date).

06/29/2015
- 6.4

By what department or departments?
State of Maine Bureau of Insurance
- 6.5

Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments?

Yes ☐ No ☐ N/A ☒
- 6.6

Have all of the recommendations within the latest financial examination report been complied with?

Yes ☐ No ☐ N/A ☒
- 7.1

Has this reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period?

Yes ☐ No ☒
- 7.2

If yes, give full information:
- 8.1

Is the company a subsidiary of a bank holding company regulated by the Federal Reserve Board?

Yes ☐ No ☒
- 8.2

If response to 8.1 is yes, please identify the name of the bank holding company.
- 8.3

Is the company affiliated with one or more banks, thrifts or securities firms?

Yes ☐ No ☒
- 8.4

If response to 8.3 is yes, please provide below the names and location (city and state of the main office) of any affiliates regulated by a federal regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroller of the Currency (OCC), the Federal Deposit Insurance Corporation (FDIC) and the Securities Exchange Commission (SEC)] and identify the affiliate's primary federal regulator.

| | | | | | |
|---------------------|-----------------------------|----------|----------|-----------|----------|
| 1 Affiliate Name | 2 Location (City, State) | 3 FRB | 4 OCC | 5 FDIC | 6 SEC |
| | | | | | |

STATEMENT AS OF MARCH 31, 2017 OF THE Anthem Health Plans of Maine, Inc.

GENERAL INTERROGATORIES

- 9.1

Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards? (a) Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of interest between personal and professional relationships; (b) Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting entity; (c) Compliance with applicable governmental laws, rules and regulations; (d) The prompt internal reporting of violations to an appropriate person or persons identified in the code; and (e) Accountability for adherence to the code.

Yes ☒ No ☐
- 9.11

If the response to 9.1 is No, please explain:
- 9.2

Has the code of ethics for senior managers been amended?

Yes ☐ No ☒
- 9.21

If the response to 9.2 is Yes, provide information related to amendment(s).
- 9.3

Have any provisions of the code of ethics been waived for any of the specified officers?

Yes ☐ No ☒
- 9.31

If the response to 9.3 is Yes, provide the nature of any waiver(s).

FINANCIAL

- 10.1

Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement?

Yes ☒ No ☐
- 10.2

If yes, indicate any amounts receivable from parent included in the Page 2 amount:

\$6,859,951

INVESTMENT

- 11.1

Were any of the stocks, bonds, or other assets of the reporting entity loaned, placed under option agreement, or otherwise made available for use by another person? (Exclude securities under securities lending agreements.)

Yes ☐ No ☒
- 11.2

If yes, give full and complete information relating thereto:
12.

Amount of real estate and mortgages held in other invested assets in Schedule BA:

\$0
13.

Amount of real estate and mortgages held in short-term investments:

\$0
- 14.1

Does the reporting entity have any investments in parent, subsidiaries and affiliates?

Yes ☐ No ☒
- 14.2

If yes, please complete the following:

| | 1 Prior Year-End Book/Adjusted Carrying Value | 2 Current Quarter Book/Adjusted Carrying Value |
|---|--|---|
| 14.21 Bonds | \$0 | \$0 |
| 14.22 Preferred Stock | \$0 | \$0 |
| 14.23 Common Stock | \$0 | \$0 |
| 14.24 Short-Term Investments | \$0 | \$0 |
| 14.25 Mortgage Loans on Real Estate | \$0 | \$0 |
| 14.26 All Other | \$0 | \$0 |
| 14.27 Total Investment in Parent, Subsidiaries and Affiliates (Subtotal Lines 14.21 to 14.26) | \$0 | \$0 |
| 14.28 Total Investment in Parent included in Lines 14.21 to 14.26 above | \$0 | \$0 |
- 15.1

Has the reporting entity entered into any hedging transactions reported on Schedule DB?

Yes ☐ No ☒
- 15.2

If yes, has a comprehensive description of the hedging program been made available to the domiciliary state? If no, attach a description with this statement.

Yes ☐ No ☐

STATEMENT AS OF MARCH 31, 2017 OF THE Anthem Health Plans of Maine, Inc.

GENERAL INTERROGATORIES

16. For the reporting entity's security lending program, state the amount of the following as of the current statement date:
- 16.1 Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2.

16.2 Total book adjusted/carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2.

16.3 Total payable for securities lending reported on the liability page.
- \$

11,307,974

\$

11,307,974

\$

11,307,974

17. Excluding items in Schedule E - Part 3 - Special Deposits, real estate, mortgage loans and investments held physically in the reporting entity's offices, vaults or safety deposit boxes, were all stocks, bonds and other securities, owned throughout the current year held pursuant to a custodial agreement with a qualified bank or trust company in accordance with Section 1, III - General Examination Considerations, F. Outsourcing of Critical Functions, Custodial or Safekeeping Agreements of the NAIC Financial Condition Examiners Handbook?
- Yes
- [X]
- No
- []

- 17.1 For all agreements that comply with the requirements of the NAIC Financial Condition Examiners Handbook, complete the following:

| 1 Name of Custodian(s) | 2 Custodian Address |
|-------------------------------------|------------------------|
| Bank of New York Mellon Corporation | New York, NY |

- 17.2 For all agreements that do not comply with the requirements of the NAIC Financial Condition Examiners Handbook, provide the name, location and a complete explanation:

| 1 Name(s) | 2 Location(s) | 3 Complete Explanation(s) |
|--------------|------------------|------------------------------|
| | | |

- 17.3 Have there been any changes, including name changes, in the custodian(s) identified in 17.1 during the current quarter?
- Yes
- []
- No
- [X]

- 17.4 If yes, give full information relating thereto:

| 1 Old Custodian | 2 New Custodian | 3 Date of Change | 4 Reason |
|--------------------|--------------------|---------------------|-------------|
| | | | |

- 17.5 Investment management – Identify all investment advisors, investment managers, broker/dealers, including individuals that have the authority to make investment decisions on behalf of the reporting entity. For assets that are managed internally by employees of the reporting entity, note as such. ["...that have access to the investment accounts"; "...handle securities"]

| 1 Name of Firm or Individual | 2 Affiliation |
|--------------------------------------|------------------|
| Dimensional Fund Advisors | U |
| McDonnell Investment Management, LLC | U |

- 17.5097 For those firms/individuals listed in the table for Question 17.5, do any firms/individuals unaffiliated with the reporting entity (i.e. designated with a "U") manage more than 10% of the reporting entity's assets?
- Yes
- [X]
- No
- []

- 17.5098 For firms/individuals unaffiliated with the reporting entity (i.e. designated with a "U") listed in the table for Question 17.5, does the total assets under management aggregate to more than 50% of the reporting entity's assets?
- Yes
- []
- No
- [X]

- 17.6 For those firms or individuals listed in the table for 17.5 with an affiliation code of "A" (affiliated) or "U" (unaffiliated), provide the information for the table below.

| 1 Central Registration Depository Number | 2 Name of Firm or Individual | 3 Legal Entity Identifier (LEI) | 4 Registered With | 5 Investment Management Agreement (IMA) Filed |
|---|--------------------------------------|------------------------------------|--------------------------------|--|
| 106482 | Dimensional Fund Advisors | WEQ826660JYSI5GUAB47 | Securities Exchange Commission | NO |
| 113878 | McDonnell Investment Management, LLC | | Securities Exchange Commission | NO |

- 18.1 Have all the filing requirements of the Purposes and Procedures Manual of the NAIC Investment Analysis Office been followed?
- Yes
- [X]
- No
- []
- 18.2 If no, list exceptions:

GENERAL INTERROGATORIES

PART 2 - HEALTH

1. Operating Percentages:
- 1.1 A&H loss percent

84.7 %
- 1.2 A&H cost containment percent

1.2 %
- 1.3 A&H expense percent excluding cost containment expenses

7.0 %
- 2.1 Do you act as a custodian for health savings accounts?

Yes [] No [X]
- 2.2 If yes, please provide the amount of custodial funds held as of the reporting date

\$
- 2.3 Do you act as an administrator for health savings accounts?

Yes [] No [X]
- 2.4 If yes, please provide the balance of the funds administered as of the reporting date

\$

STATEMENT AS OF MARCH 31, 2017 OF THE Anthem Health Plans of Maine, Inc.

SCHEDULE S - CEDED REINSURANCE

Showing All New Reinsurance Treaties - Current Year to Date

[illegible]

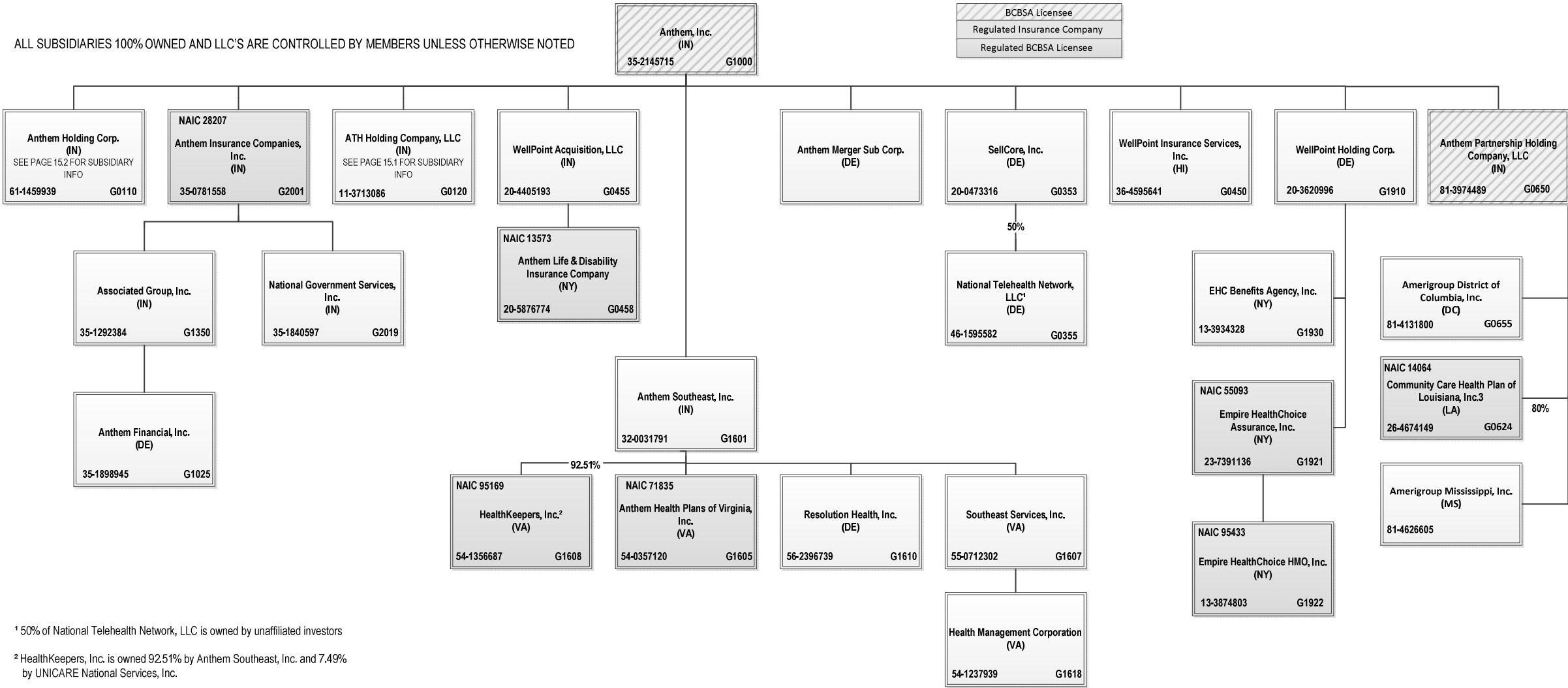
SCHEDULE T - PREMIUMS AND OTHER CONSIDERATIONS

Current Year to Date - Allocated by States and Territories

| | | 1 | Direct Business Only | | | | | | | |
|----------------------|---|---------------|------------------------------|----------------------|--------------------|--|--|----------------------------|---------------------------|------------------------|
| States, etc. | | Active Status | Accident and Health Premiums | Medicare Title XVIII | Medicaid Title XIX | Federal Employees Health Benefits Program Premiums | Life and Annuity Premiums & Other Considerations | Property/Casualty Premiums | Total Columns 2 Through 7 | Deposit-Type Contracts |
| 1. | Alabama | AL | N | | | | | | 0 | |
| 2. | Alaska | AK | N | | | | | | 0 | |
| 3. | Arizona | AZ | N | | | | | | 0 | |
| 4. | Arkansas | AR | N | | | | | | 0 | |
| 5. | California | CA | N | | | | | | 0 | |
| 6. | Colorado | CO | N | | | | | | 0 | |
| 7. | Connecticut | CT | N | | | | | | 0 | |
| 8. | Delaware | DE | N | | | | | | 0 | |
| 9. | District of Columbia | DC | N | | | | | | 0 | |
| 10. | Florida | FL | N | | | | | | 0 | |
| 11. | Georgia | GA | N | | | | | | 0 | |
| 12. | Hawaii | HI | N | | | | | | 0 | |
| 13. | Idaho | ID | N | | | | | | 0 | |
| 14. | Illinois | IL | N | | | | | | 0 | |
| 15. | Indiana | IN | N | | | | | | 0 | |
| 16. | Iowa | IA | N | | | | | | 0 | |
| 17. | Kansas | KS | N | | | | | | 0 | |
| 18. | Kentucky | KY | N | | | | | | 0 | |
| 19. | Louisiana | LA | N | | | | | | 0 | |
| 20. | Maine | ME | L | 232,866,465 | 9,180,454 | 54,491,011 | | | 296,537,930 | |
| 21. | Maryland | MD | N | | | | | | 0 | |
| 22. | Massachusetts | MA | N | | | | | | 0 | |
| 23. | Michigan | MI | N | | | | | | 0 | |
| 24. | Minnesota | MN | N | | | | | | 0 | |
| 25. | Mississippi | MS | N | | | | | | 0 | |
| 26. | Missouri | MO | N | | | | | | 0 | |
| 27. | Montana | MT | N | | | | | | 0 | |
| 28. | Nebraska | NE | N | | | | | | 0 | |
| 29. | Nevada | NV | N | | | | | | 0 | |
| 30. | New Hampshire | NH | N | | | | | | 0 | |
| 31. | New Jersey | NJ | N | | | | | | 0 | |
| 32. | New Mexico | NM | N | | | | | | 0 | |
| 33. | New York | NY | N | | | | | | 0 | |
| 34. | North Carolina | NC | N | | | | | | 0 | |
| 35. | North Dakota | ND | N | | | | | | 0 | |
| 36. | Ohio | OH | N | | | | | | 0 | |
| 37. | Oklahoma | OK | N | | | | | | 0 | |
| 38. | Oregon | OR | N | | | | | | 0 | |
| 39. | Pennsylvania | PA | N | | | | | | 0 | |
| 40. | Rhode Island | RI | N | | | | | | 0 | |
| 41. | South Carolina | SC | N | | | | | | 0 | |
| 42. | South Dakota | SD | N | | | | | | 0 | |
| 43. | Tennessee | TN | N | | | | | | 0 | |
| 44. | Texas | TX | N | | | | | | 0 | |
| 45. | Utah | UT | N | | | | | | 0 | |
| 46. | Vermont | VT | N | | | | | | 0 | |
| 47. | Virginia | VA | N | | | | | | 0 | |
| 48. | Washington | WA | N | | | | | | 0 | |
| 49. | West Virginia | WV | N | | | | | | 0 | |
| 50. | Wisconsin | WI | N | | | | | | 0 | |
| 51. | Wyoming | WY | N | | | | | | 0 | |
| 52. | American Samoa | AS | N | | | | | | 0 | |
| 53. | Guam | GU | N | | | | | | 0 | |
| 54. | Puerto Rico | PR | N | | | | | | 0 | |
| 55. | U.S. Virgin Islands | VI | N | | | | | | 0 | |
| 56. | Northern Mariana Islands | MP | N | | | | | | 0 | |
| 57. | Canada | CAN | N | | | | | | 0 | |
| 58. | Aggregate Other Aliens | OT | XXX | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 59. | Subtotal | XXX | 232,866,465 | 9,180,454 | 0 | 54,491,011 | 0 | 0 | 296,537,930 | 0 |
| 60. | Reporting Entity Contributions for Employee Benefit Plans | XXX | | | | | | | 0 | |
| 61. | Totals (Direct Business) | (a) 1 | 232,866,465 | 9,180,454 | 0 | 54,491,011 | 0 | 0 | 296,537,930 | 0 |
| DETAILS OF WRITE-INS | | | | | | | | | | |
| 58001. | | XXX | | | | | | | | |
| 58002. | | XXX | | | | | | | | |
| 58003. | | XXX | | | | | | | | |
| 58998. | Summary of remaining write-ins for Line 58 from overflow page | XXX | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 58999. | Totals (Lines 58001 through 58003 plus 58998)(Line 58 above) | XXX | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |

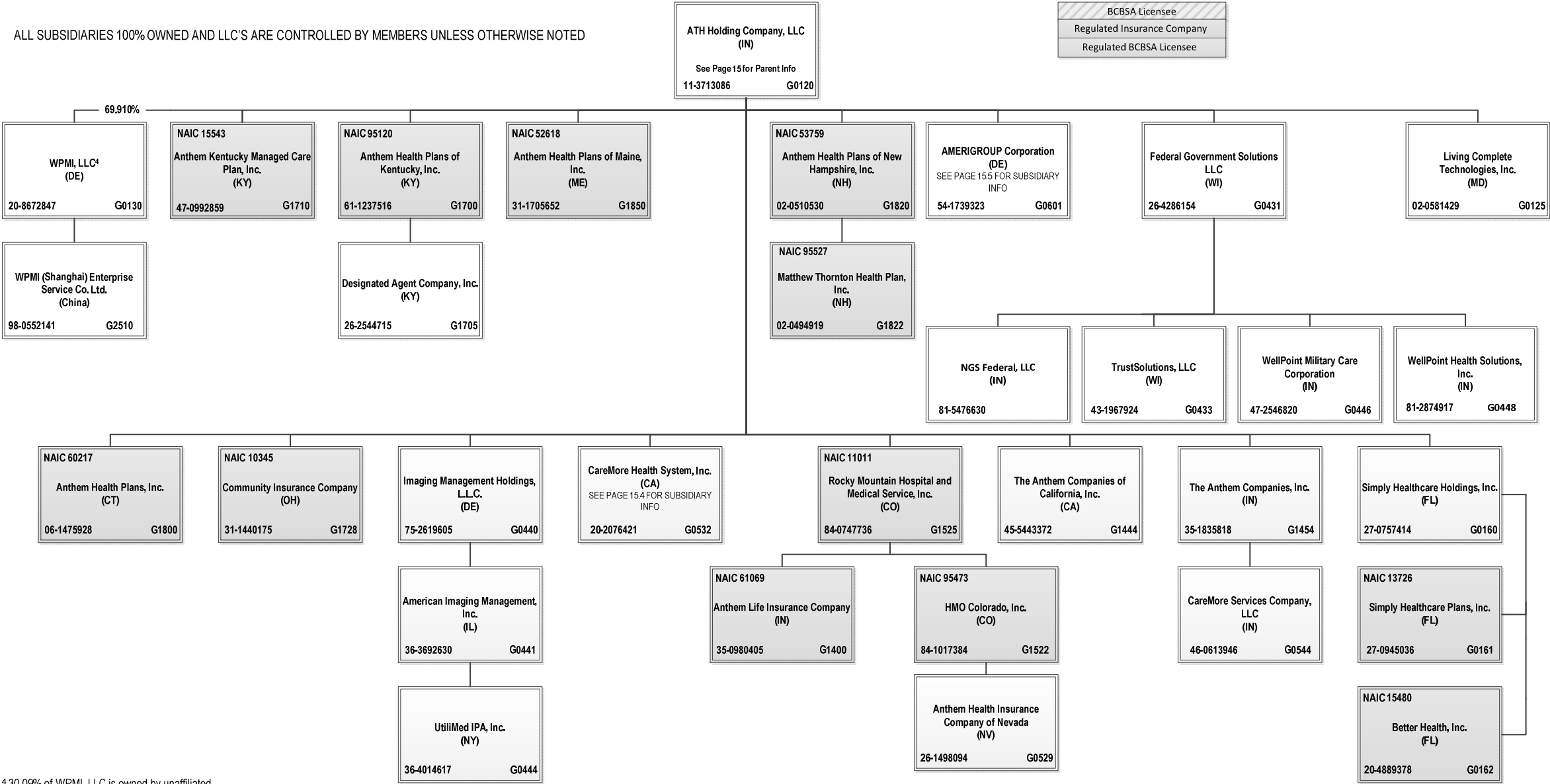
(L) Licensed or Chartered - Licensed Insurance Carrier or Domiciled RRG; (R) Registered - Non-domiciled RRGs; (Q) Qualified - Qualified or Accredited Reinsurer; (E) Eligible - Reporting Entities eligible or approved to write Surplus Lines in the state; (N) None of the above - Not allowed to write business in the state.
(a) Insert the number of L responses except for Canada and Other Alien.

SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP
PART 1 – ORGANIZATIONAL CHART



SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP
PART 1 – ORGANIZATIONAL CHART

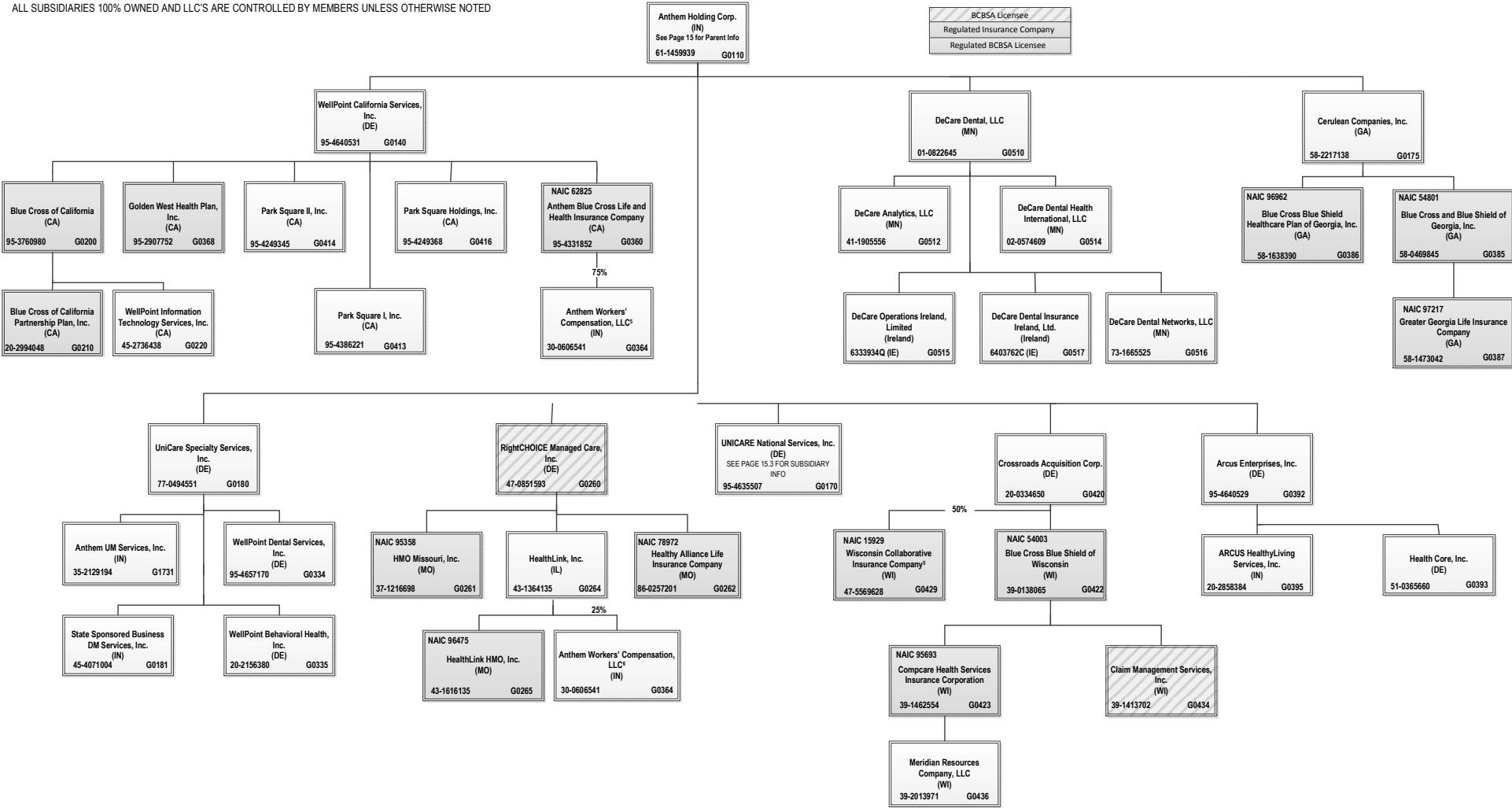
ALL SUBSIDIARIES 100% OWNED AND LLC'S ARE CONTROLLED BY MEMBERS UNLESS OTHERWISE NOTED



⁴ 30.09% of WPMI, LLC is owned by unaffiliated investors

SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP
PART 1 – ORGANIZATIONAL CHART

ALL SUBSIDIARIES 100% OWNED AND LLC'S ARE CONTROLLED BY MEMBERS UNLESS OTHERWISE NOTED

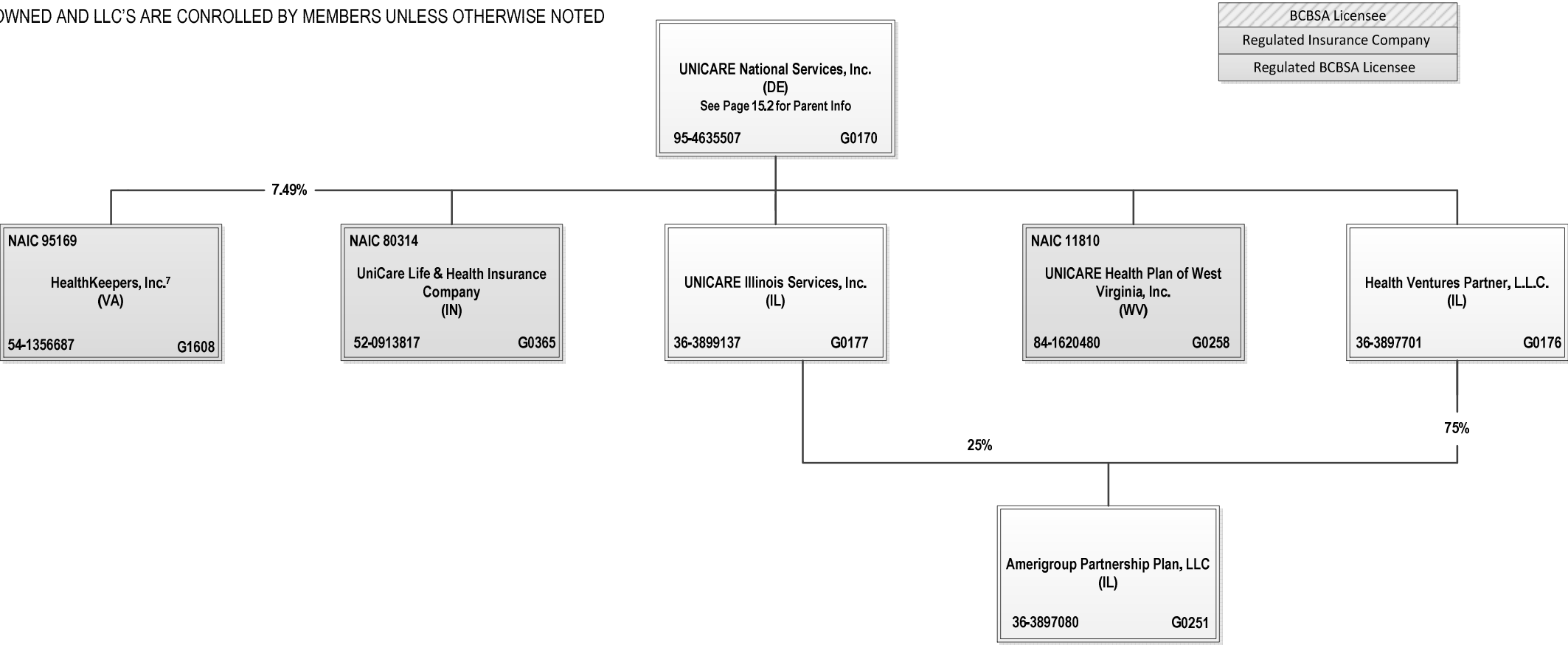


⁵ 50% of WCIC is owned by an unaffiliated investor.

⁶ Anthem Workers' Compensation LLC is owned 75% by Anthem Blue Cross Life and Health Insurance Company and 25% by HealthLink, Inc.

SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP
PART 1 – ORGANIZATIONAL CHART

ALL SUBSIDIARIES 100% OWNED AND LLC'S ARE CONTROLLED BY MEMBERS UNLESS OTHERWISE NOTED

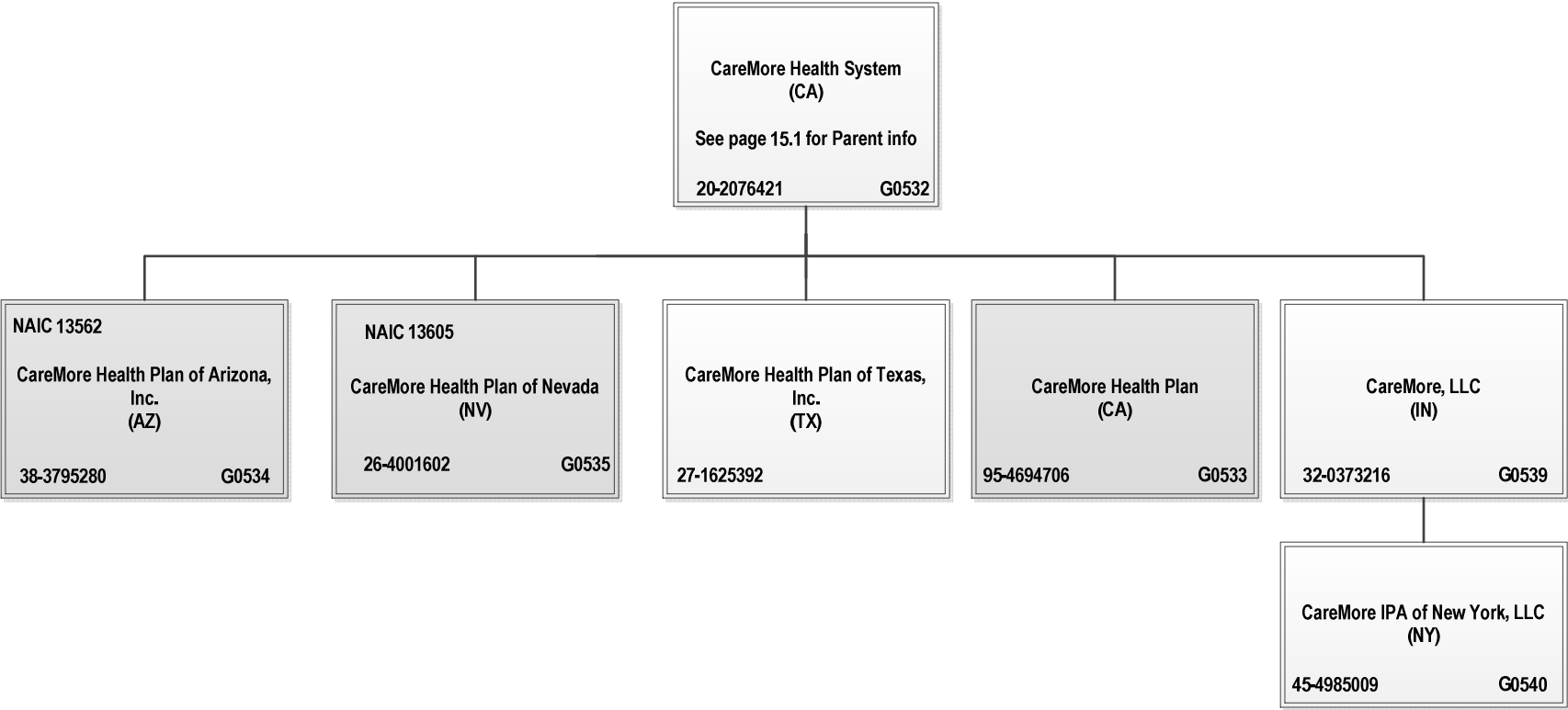


⁷ HealthKeepers, Inc. is owned 92.51% by Anthem Southeast, Inc. and 7.49% by UNICARE National Services, Inc.

SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP
PART 1 – ORGANIZATIONAL CHART

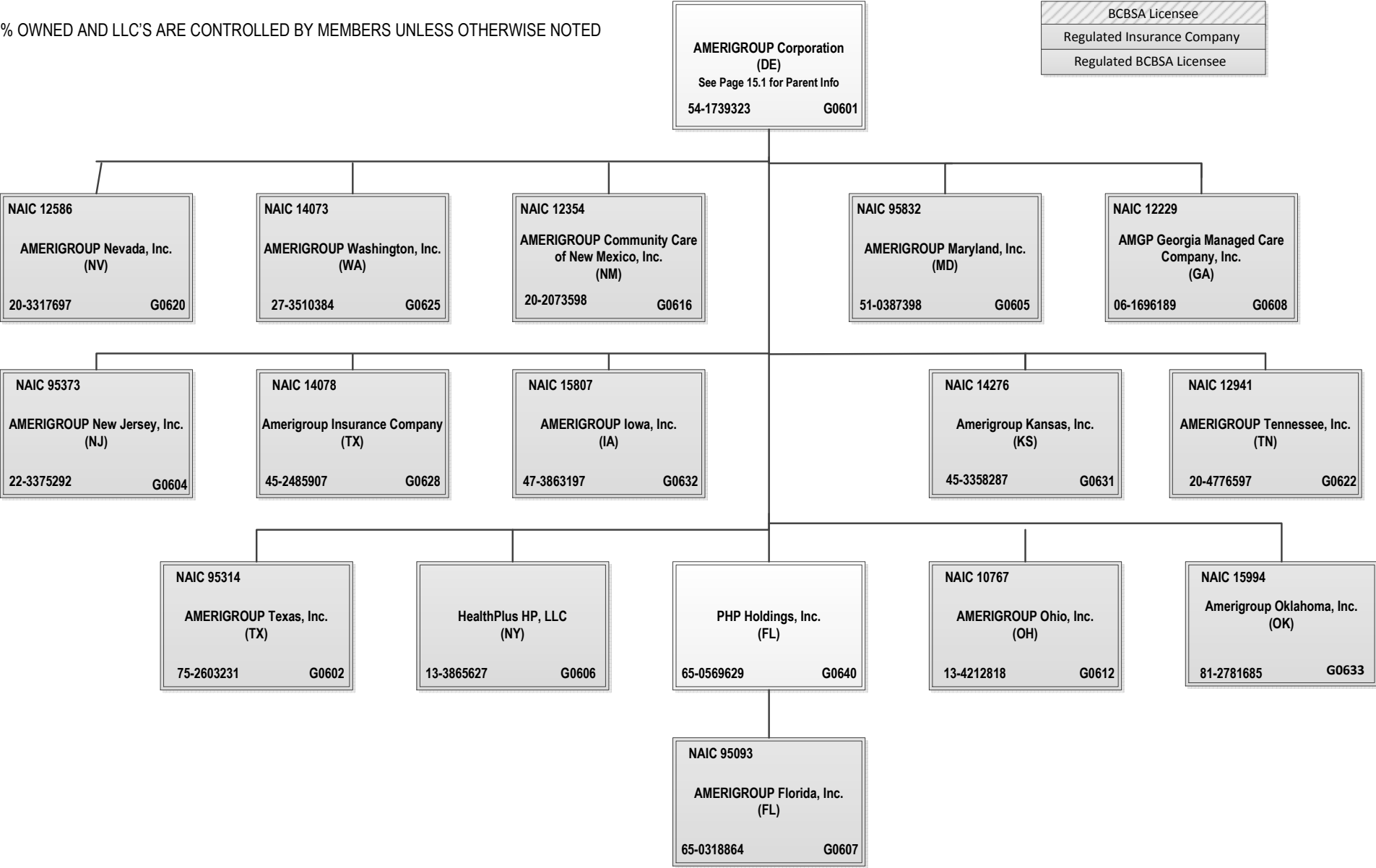
| |
|-----------------------------|
| BCBSA Licensee |
| Regulated Insurance Company |
| Regulated BCBSA Licensee |

ALL SUBSIDIARIES 100% OWNED AND LLC'S ARE CONTROLLED BY MEMBERS UNLESS OTHERWISE NOTED



SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP
PART 1 – ORGANIZATIONAL CHART

ALL SUBSIDIARIES 100% OWNED AND LLC'S ARE CONTROLLED BY MEMBERS UNLESS OTHERWISE NOTED



STATEMENT AS OF MARCH 31, 2017 OF THE Anthem Health Plans of Maine, Inc.

SCHEDULE Y
PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 |
|------------|--------------|-------------------|------------|--------------|------|--|---|-----------------------|-----------------------------------|---|--|--|--|-----------------------------------|-------|
| Group Code | Group Name | NAIC Company Code | ID Number | Federal RSSD | CIK | Name of Securities Exchange if Publicly Traded (U.S. or International) | Names of Parent, Subsidiaries Or Affiliates | Domi-ciliary Location | Relation-ship to Reporting Entity | Directly Controlled by (Name of Entity/Person) | Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other) | If Control is Owner-ship Provide Percen-tage | Ultimate Controlling Entity(ies)/Person(s) | Is an SCA Filing Re-quired? (Y/N) | * |
| .0671 | Anthem, Inc. | | 36-3692630 | | | | American Imaging Management, Inc. AMERIGROUP Community Care of New Mexico, Inc. | IL | NIA | Imaging Management Holdings, L.L.C. | Ownership..... | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | 12354 | 20-2073598 | | | | AMERIGROUP Corporation | NM | IA | AMERIGROUP Corporation | Ownership..... | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | | 54-1739323 | | | | AMERIGROUP Corporation | DE | NIA | ATH Holding Company, LLC | Ownership..... | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | | 81-4131800 | | | | Amerigroup District of Columbia, Inc. | DC | NIA | Anthem Partnership Holding Company, LLC | Ownership..... | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | 95093 | 65-0318864 | | | | AMERIGROUP Florida, Inc. | FL | IA | PHP Holdings, Inc. | Ownership..... | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | 14078 | 45-2485907 | | | | Amerigroup Insurance Company | TX | IA | AMERIGROUP Corporation | Ownership..... | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | 15807 | 47-3863197 | | | | AMERIGROUP Iowa, Inc. | IA | IA | AMERIGROUP Corporation | Ownership..... | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | 14276 | 45-3358287 | | | | Amerigroup Kansas, Inc. | KS | IA | AMERIGROUP Corporation | Ownership..... | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | 95832 | 51-0387398 | | | | AMERIGROUP Maryland, Inc. | MD | IA | AMERIGROUP Corporation | Ownership..... | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | | 81-4626605 | | | | Amerigroup Mississippi, Inc. | MS | NIA | Anthem Partnership Holding Company, LLC | Ownership..... | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | 12586 | 20-3317697 | | | | AMERIGROUP Nevada, Inc. | NV | IA | AMERIGROUP Corporation | Ownership..... | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | 95373 | 22-3375292 | | | | AMERIGROUP New Jersey, Inc. | NJ | IA | AMERIGROUP Corporation | Ownership..... | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | 10767 | 13-4212818 | | | | AMERIGROUP Ohio, Inc. | OH | IA | AMERIGROUP Corporation | Ownership..... | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | 15994 | 81-2781685 | | | | AMERIGROUP Oklahoma, Inc. | OK | IA | AMERIGROUP Corporation | Ownership..... | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | | 36-3897080 | | | | Amerigroup Partnership Plan, LLC | IL | NIA | Health Ventures Partner, L.L.C. | Ownership..... | 75.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | | 36-3897080 | | | | Amerigroup Partnership Plan, LLC | IL | NIA | UNICARE Illinois Services, Inc. | Ownership..... | 25.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | 12941 | 20-4776597 | | | | AMERIGROUP Tennessee, Inc. | TN | IA | AMERIGROUP Corporation | Ownership..... | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | 95314 | 75-2603231 | | | | AMERIGROUP Texas, Inc. | TX | IA | AMERIGROUP Corporation | Ownership..... | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | 14073 | 27-3510384 | | | | AMERIGROUP Washington, Inc. | WA | IA | AMERIGROUP Corporation | Ownership..... | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | 12229 | 06-1696189 | | | | AMGP Georgia Managed Care Company, Inc. Anthem Blue Cross Life and Health Insurance Company | GA | IA | AMERIGROUP Corporation | Ownership..... | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | 62825 | 95-4331852 | | | | Anthem Financial, Inc. | CA | IA | WellPoint California Services, Inc. | Ownership..... | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | | 35-1898945 | | | | Anthem Health Insurance Company of Nevada | DE | NIA | Associated Group, Inc. | Ownership..... | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | | 26-1498094 | | | | Anthem Health Plans of Kentucky, Inc. | NV | NIA | HMO Colorado, Inc. | Ownership..... | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | 95120 | 61-1237516 | | | | Anthem Health Plans of Maine, Inc. | IA | IA | ATH Holding Company, LLC | Ownership..... | 100.000 | Anthem, Inc. | .Y | .0108 |
| .0671 | Anthem, Inc. | 52618 | 31-1705652 | | | | Anthem Health Plans of New Hampshire, Inc. | ME | RE | ATH Holding Company, LLC | Ownership..... | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | 53759 | 02-0510530 | | | | Anthem Health Plans of Virginia, Inc. | NH | IA | ATH Holding Company, LLC | Ownership..... | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | 71835 | 54-0357120 | 40003317 | | | Anthem Health Plans, Inc. | VA | IA | Anthem Southeast, Inc. | Ownership..... | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | 60217 | 06-1475928 | | | | Anthem Holding Corp. | CT | IA | ATH Holding Company, LLC | Ownership..... | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | | 61-1459339 | | | New York Stock Exchange (NYSE) | Anthem, Inc. | IN | NIA | Anthem, Inc. | Ownership..... | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | | 35-2145715 | | 6324 | | Anthem Insurance Companies, Inc. | IN | UIP | Anthem, Inc. | Ownership..... | 100.000 | Anthem, Inc. | .Y | |
| .0671 | Anthem, Inc. | 28207 | 35-0781558 | | | | Anthem Kentucky Managed Care Plan, Inc. | IN | IA | ATH Holding Company, LLC | Ownership..... | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | 15543 | 47-0992859 | | | | Anthem Life & Disability Insurance Company | KY | IA | WellPoint Acquisition, LLC | Ownership..... | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | 13573 | 20-5876774 | | | | Anthem Life Insurance Company | NY | IA | Rocky Mountain Hospital and Medical Service, Inc. | Ownership..... | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | 61069 | 35-0980405 | | | | Anthem Merger Sub Corp. | IN | IA | Anthem, Inc. | Ownership..... | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | | 81-3974489 | | | | Anthem Partnership Holding Company, LLC | DE | NIA | Anthem, Inc. | Ownership..... | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | | 32-0031791 | | | | Anthem Southeast, Inc. | IN | NIA | Anthem, Inc. | Ownership..... | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | | 35-2129194 | | | | Anthem UM Services, Inc. | IN | NIA | UNICARE Specialty Services, Inc. | Ownership..... | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | | 30-0606541 | | | | Anthem Workers' Compensation, LLC | IN | NIA | Anthem Blue Cross Life and Health Insurance Company | Ownership..... | 75.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | | 30-0606541 | | | | Anthem Workers' Compensation, LLC | IN | NIA | HealthLink, Inc. | Ownership..... | 25.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | | 95-4640529 | | | | Arcus Enterprises, Inc. | DE | NIA | Anthem Holding Corp. | Ownership..... | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | | 20-2858384 | | | | ARCUS HealthLiving Services, Inc. | IN | NIA | Arcus Enterprises, Inc. | Ownership..... | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | | 35-1292384 | | | | Associated Group, Inc. | IN | NIA | Anthem Insurance Companies, Inc. | Ownership..... | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | | 11-3713086 | | | | ATH Holding Company, LLC | IN | UDP | Anthem, Inc. | Ownership..... | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | 15480 | 20-4889378 | | | | Better Health, Inc. | FL | IA | Simply Healthcare Holdings, Inc. | Ownership..... | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | 54801 | 58-0469845 | | | | Blue Cross and Blue Shield of Georgia, Inc. | GA | IA | Cerulean Companies, Inc. | Ownership..... | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | | 58-0469845 | | | | Blue Cross Blue Shield Healthcare Plan of Georgia, Inc. | GA | IA | Cerulean Companies, Inc. | Ownership..... | 100.000 | Anthem, Inc. | .N | |
| .0671 | Anthem, Inc. | 96962 | 58-1638390 | | | | Blue Cross Blue Shield of Wisconsin | WI | IA | Cerulean Companies, Inc. | Ownership..... | 100.000 | Anthem, Inc. | .Y | .0108 |
| .0671 | Anthem, Inc. | 54003 | 39-0138065 | | | | Blue Cross Blue Shield of Wisconsin | WI | IA | Cerulean Companies, Inc. | Ownership..... | 100.000 | Anthem, Inc. | .Y | .0108 |

SCHEDULE Y
PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 |
|------------|--------------|-------------------|------------|--------------|-----|--|---|-----------------------|-----------------------------------|--|--|--|--|-----------------------------------|-------|
| Group Code | Group Name | NAIC Company Code | ID Number | Federal RSSD | CIK | Name of Securities Exchange if Publicly Traded (U.S. or International) | Names of Parent, Subsidiaries Or Affiliates | Domi-ciliary Location | Relation-ship to Reporting Entity | Directly Controlled by (Name of Entity/Person) | Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other) | If Control is Owner-ship Provide Percen-tage | Ultimate Controlling Entity(ies)/Person(s) | Is an SCA Filing Re-quired? (Y/N) | * |
| .0671 | Anthem, Inc. | | 95-3760980 | | | | Blue Cross of California | CA | IA | WellPoint California Services, Inc. | Ownership | 100.000 | Anthem, Inc. | N | .0101 |
| .0671 | Anthem, Inc. | | 20-2994048 | | | | Blue Cross of California Partnership Plan, Inc. | CA | IA | Blue Cross of California | Ownership | 100.000 | Anthem, Inc. | N | .0102 |
| .0671 | Anthem, Inc. | | 95-4694706 | | | | CareMore Health Plan | CA | IA | CareMore Health System | Ownership | 100.000 | Anthem, Inc. | N | .0103 |
| .0671 | Anthem, Inc. | 13562 | 38-3795280 | | | | CareMore Health Plan of Arizona, Inc. | AZ | IA | CareMore Health System | Ownership | 100.000 | Anthem, Inc. | N | |
| .0671 | Anthem, Inc. | 13605 | 26-4001602 | | | | CareMore Health Plan of Nevada | NV | IA | CareMore Health System | Ownership | 100.000 | Anthem, Inc. | N | |
| .0671 | Anthem, Inc. | | 27-1625392 | | | | CareMore Health Plan of Texas, Inc. | TX | NIA | CareMore Health System | Ownership | 100.000 | Anthem, Inc. | N | |
| .0671 | Anthem, Inc. | | 45-4985009 | | | | CareMore IPA of New York, LLC | NY | NIA | CareMore, LLC | Ownership | 100.000 | Anthem, Inc. | N | |
| .0671 | Anthem, Inc. | | 32-0373216 | | | | CareMore, LLC | IN | NIA | CareMore Health System | Ownership | 100.000 | Anthem, Inc. | N | |
| .0671 | Anthem, Inc. | | 20-2076421 | | | | CareMore Health System | CA | NIA | ATH Holding Company, LLC | Ownership | 100.000 | Anthem, Inc. | N | |
| .0671 | Anthem, Inc. | | 46-0613946 | | | | CareMore Services Company, LLC | IN | NIA | The Anthem Companies, Inc. | Ownership | 100.000 | Anthem, Inc. | N | |
| .0671 | Anthem, Inc. | | 58-2217138 | | | | Cerulean Companies, Inc. | GA | NIA | Anthem Holding Corp. | Ownership | 100.000 | Anthem, Inc. | N | |
| .0671 | Anthem, Inc. | | 39-1413702 | | | | Claim Management Services, Inc. | WI | NIA | Blue Cross Blue Shield of Wisconsin | Ownership | 100.000 | Anthem, Inc. | N | |
| | | | | | | | Community Care Health Plan of Louisiana, Inc. | | | | | | | | |
| .0671 | Anthem, Inc. | 14064 | 26-4674149 | | | | | LA | IA | Anthem Partnership Holding Company, LLC | Ownership | 80.000 | Anthem, Inc. | N | .0109 |
| .0671 | Anthem, Inc. | 10345 | 31-1440175 | | | | Community Insurance Company | OH | IA | ATH Holding Company, LLC | Ownership | 100.000 | Anthem, Inc. | N | |
| | | | | | | | Compcare Health Services Insurance Corporation | WI | IA | Blue Cross Blue Shield of Wisconsin | Ownership | 100.000 | Anthem, Inc. | N | |
| .0671 | Anthem, Inc. | 95693 | 39-1462554 | | | | Crossroads Acquisition Corp. | DE | NIA | Anthem Holding Corp. | Ownership | 100.000 | Anthem, Inc. | N | |
| .0671 | Anthem, Inc. | | 20-0334650 | | | | DeCare Analytics, LLC | MN | NIA | DeCare Dental, LLC | Ownership | 100.000 | Anthem, Inc. | N | |
| .0671 | Anthem, Inc. | | 41-1905556 | | | | DeCare Dental Health International, LLC | MN | NIA | DeCare Dental, LLC | Ownership | 100.000 | Anthem, Inc. | N | |
| .0671 | Anthem, Inc. | | 02-0574609 | | | | DeCare Dental Insurance Ireland, Ltd. | IRL | NIA | DeCare Dental, LLC | Ownership | 100.000 | Anthem, Inc. | N | |
| .0671 | Anthem, Inc. | | 73-1665525 | | | | DeCare Dental Networks, LLC | MN | NIA | DeCare Dental, LLC | Ownership | 100.000 | Anthem, Inc. | N | |
| .0671 | Anthem, Inc. | | 01-0822645 | | | | DeCare Dental, LLC | MN | NIA | Anthem Holding Corp. | Ownership | 100.000 | Anthem, Inc. | N | |
| .0671 | Anthem, Inc. | | | | | | DeCare Operations Ireland, Limited | IRL | NIA | DeCare Dental, LLC | Ownership | 100.000 | Anthem, Inc. | N | |
| .0671 | Anthem, Inc. | | 26-2544715 | | | | Designated Agent Company, Inc. | KY | NIA | Anthem Health Plans of Kentucky, Inc. | Ownership | 100.000 | Anthem, Inc. | N | |
| .0671 | Anthem, Inc. | | 13-3934328 | | | | EHC Benefits Agency, Inc. | NY | NIA | WellPoint Holding Corp | Ownership | 100.000 | Anthem, Inc. | N | |
| .0671 | Anthem, Inc. | 55093 | 23-7391136 | | | | Empire HealthChoice Assurance, Inc. | NY | IA | WellPoint Holding Corp | Ownership | 100.000 | Anthem, Inc. | N | |
| .0671 | Anthem, Inc. | 95433 | 13-3874803 | | | | Empire HealthChoice HMO, Inc. | NY | IA | Empire HealthChoice Assurance, Inc. | Ownership | 100.000 | Anthem, Inc. | N | |
| .0671 | Anthem, Inc. | | 26-4286154 | | | | Federal Government Solutions, LLC | WI | NIA | ATH Holding Company, LLC | Ownership | 100.000 | Anthem, Inc. | N | |
| .0671 | Anthem, Inc. | | 95-2907752 | | | | Golden West Health Plan, Inc. | CA | IA | WellPoint California Services, Inc. | Ownership | 100.000 | Anthem, Inc. | N | .0104 |
| | | | | | | | Greater Georgia Life Insurance Company | GA | IA | Blue Cross and Blue Shield of Georgia, Inc. | Ownership | 100.000 | Anthem, Inc. | N | |
| .0671 | Anthem, Inc. | 97217 | 58-1473042 | | | | Health Core, Inc. | DE | NIA | Arcus Enterprises, Inc. | Ownership | 100.000 | Anthem, Inc. | N | |
| .0671 | Anthem, Inc. | | 51-0365660 | | | | Health Management Corporation | VA | NIA | Southeast Services, Inc. | Ownership | 100.000 | Anthem, Inc. | N | |
| .0671 | Anthem, Inc. | | 36-3897701 | | | | Health Ventures Partner, L.L.C. | IL | NIA | UNICARE National Services, Inc. | Ownership | 100.000 | Anthem, Inc. | N | |
| .0671 | Anthem, Inc. | 95169 | 54-1356687 | | | | HealthKeepers, Inc. | VA | IA | Anthem Southeast, Inc. | Ownership | 92.510 | Anthem, Inc. | N | |
| .0671 | Anthem, Inc. | 95169 | 54-1356687 | | | | HealthKeepers, Inc. | VA | IA | UNICARE National Services, Inc. | Ownership | 7.490 | Anthem, Inc. | N | |
| .0671 | Anthem, Inc. | 96475 | 43-1616135 | | | | HealthLink HMO, Inc. | MO | IA | HealthLink, Inc. | Ownership | 100.000 | Anthem, Inc. | N | |
| .0671 | Anthem, Inc. | | 43-1364135 | | | | HealthLink, Inc. | IL | NIA | RightCHOICE Managed Care, Inc. | Ownership | 100.000 | Anthem, Inc. | N | |
| .0671 | Anthem, Inc. | | 13-3865627 | | | | HealthPlus HP, LLC | NY | IA | AMERIGROUP Corporation | Ownership | 100.000 | Anthem, Inc. | N | .0100 |
| .0671 | Anthem, Inc. | 78972 | 86-0257201 | | | | Healthy Alliance Life Insurance Company | MO | IA | RightCHOICE Managed Care, Inc. | Ownership | 100.000 | Anthem, Inc. | N | |
| | | | | | | | Rocky Mountain Hospital and Medical Service, Inc. | CO | IA | | Ownership | 100.000 | Anthem, Inc. | Y | .0108 |
| .0671 | Anthem, Inc. | 95473 | 84-1017384 | | | | HMO Colorado, Inc. | MO | IA | RightCHOICE Managed Care, Inc. | Ownership | 100.000 | Anthem, Inc. | N | |
| .0671 | Anthem, Inc. | 95358 | 37-1216698 | | | | HMO Missouri, Inc. | DE | NIA | ATH Holding Company, LLC | Ownership | 100.000 | Anthem, Inc. | N | |
| .0671 | Anthem, Inc. | | 75-2619605 | | | | Imaging Management Holdings, L.L.C. | MD | NIA | ATH Holding Company, LLC | Ownership | 100.000 | Anthem, Inc. | N | |
| .0671 | Anthem, Inc. | | 02-0581429 | | | | Living Complete Technologies, Inc. | | | Anthem Health Plans of New Hampshire, Inc. | | | | | |
| .0671 | Anthem, Inc. | 95527 | 02-0494919 | | | | Matthew Thornton Health Plan, Inc. | NH | IA | | Ownership | 100.000 | Anthem, Inc. | N | |
| | | | | | | | Meridian Resource Company, LLC | WI | NIA | Compcare Health Services Insurance Corporation | Ownership | 100.000 | Anthem, Inc. | N | |
| .0671 | Anthem, Inc. | | 39-2013971 | | | | National Government Services, Inc. | IN | NIA | Anthem Insurance Companies, Inc. | Ownership | 100.000 | Anthem, Inc. | N | |
| .0671 | Anthem, Inc. | | 46-1595582 | | | | National Telehealth Network, LLC | DE | NIA | Sellcore, Inc. | Ownership | 50.000 | Anthem, Inc. | N | .0105 |
| .0671 | Anthem, Inc. | | 81-5476630 | | | | NGS Federal, LLC | IN | NIA | Federal Government Solutions, LLC | Ownership | 100.000 | Anthem, Inc. | N | |

STATEMENT AS OF MARCH 31, 2017 OF THE Anthem Health Plans of Maine, Inc.

SCHEDULE Y
PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other) | 13 If Control is Owner- ship Provide Percen- tage | 14 Ultimate Controlling Entity(ies)/Person(s) | 15 Is an SCA Filing Re- quired? (Y/N) | 16 * |
|---------------|--------------|-------------------------|--------------|-----------------|-----|--|---|-----------------------------------|--|---|---|---|---|---|---------|
| Group Code | Group Name | NAIC Company Code | ID Number | Federal RSSD | CIK | Name of Securities Exchange if Publicly Traded (U.S. or International) | Names of Parent, Subsidiaries Or Affiliates | Domi- ciliary Loca- tion | Relation- ship to Reporting Entity | Directly Controlled by (Name of Entity/Person) | | | | | |
| .0671 | Anthem, Inc. | | 95-4249368 | | | | Park Square Holdings, Inc. | CA | NIA | WellPoint California Services, Inc. | Ownership | 100.000 | Anthem, Inc. | N | |
| .0671 | Anthem, Inc. | | 95-4386221 | | | | Park Square I, Inc. | CA | NIA | WellPoint California Services, Inc. | Ownership | 100.000 | Anthem, Inc. | N | |
| .0671 | Anthem, Inc. | | 95-4249345 | | | | Park Square II, Inc. | CA | NIA | WellPoint California Services, Inc. | Ownership | 100.000 | Anthem, Inc. | N | |
| .0671 | Anthem, Inc. | | 65-0569629 | | | | PHP Holdings, Inc. | FL | NIA | AMERIGROUP Corporation | Ownership | 100.000 | Anthem, Inc. | N | |
| .0671 | Anthem, Inc. | | 56-2396739 | | | | Resolution Health, Inc. | DE | NIA | Anthem Southeast, Inc. | Ownership | 100.000 | Anthem, Inc. | N | |
| .0671 | Anthem, Inc. | | 47-0851593 | | | | RightCHOICE Managed Care, Inc. | DE | NIA | Anthem Holding Corp. | Ownership | 100.000 | Anthem, Inc. | N | |
| | | | | | | | Rocky Mountain Hospital and Medical Service, Inc. | CO | IA | ATH Holding Company, LLC | Ownership | 100.000 | Anthem, Inc. | N | |
| .0671 | Anthem, Inc. | 11011 | 84-0747736 | | | | SellCore, Inc. | DE | NIA | Anthem, Inc. | Ownership | 100.000 | Anthem, Inc. | N | |
| .0671 | Anthem, Inc. | | 20-0473316 | | | | Simply Healthcare Holdings, Inc. | FL | NIA | ATH Holding Company, LLC | Ownership | 100.000 | Anthem, Inc. | N | |
| .0671 | Anthem, Inc. | | 27-0757414 | | | | Simply Healthcare Plans, Inc. | FL | IA | Simply Healthcare Holdings, Inc. | Ownership | 100.000 | Anthem, Inc. | N | |
| .0671 | Anthem, Inc. | 13726 | 27-0945036 | | | | Southeast Services, Inc. | VA | NIA | Anthem Southeast, Inc. | Ownership | 100.000 | Anthem, Inc. | N | |
| .0671 | Anthem, Inc. | | 55-0712302 | | | | State Sponsored DM Services, Inc. | IN | NIA | UNICARE Specialty Services, Inc. | Ownership | 100.000 | Anthem, Inc. | N | |
| .0671 | Anthem, Inc. | | 45-4071004 | | | | The Anthem Companies, Inc. | IN | NIA | ATH Holding Company, LLC | Ownership | 100.000 | Anthem, Inc. | N | |
| .0671 | Anthem, Inc. | | 35-1835818 | | | | The Anthem Companies of California, Inc. | CA | NIA | ATH Holding Company, LLC | Ownership | 100.000 | Anthem, Inc. | N | |
| .0671 | Anthem, Inc. | | 45-5443372 | | | | TrustSolutions, LLC | WI | NIA | Federal Government Solutions, LLC | Ownership | 100.000 | Anthem, Inc. | N | |
| .0671 | Anthem, Inc. | | 43-1967924 | | | | UNICARE Health Plan of West Virginia, Inc. | WV | IA | UNICARE National Services, Inc. | Ownership | 100.000 | Anthem, Inc. | N | |
| .0671 | Anthem, Inc. | 11810 | 84-1620480 | | | | UNICARE Illinois Services, Inc. | IL | NIA | UNICARE National Services, Inc. | Ownership | 100.000 | Anthem, Inc. | N | |
| .0671 | Anthem, Inc. | | 36-3899137 | | | | UNICARE Life & Health Insurance Company | IN | IA | UNICARE National Services, Inc. | Ownership | 100.000 | Anthem, Inc. | N | |
| .0671 | Anthem, Inc. | 80314 | 52-0913817 | | | | UNICARE National Services, Inc. | DE | NIA | Anthem Holding Corp. | Ownership | 100.000 | Anthem, Inc. | N | |
| .0671 | Anthem, Inc. | | 95-4635507 | | | | UNICARE Specialty Services, Inc. | DE | NIA | Anthem Holding Corp. | Ownership | 100.000 | Anthem, Inc. | N | |
| .0671 | Anthem, Inc. | | 77-0494551 | | | | UtiliMED IPA, Inc. | NY | NIA | American Imaging Management, Inc. | Ownership | 100.000 | Anthem, Inc. | N | |
| .0671 | Anthem, Inc. | | 36-4014617 | | | | WellPoint Acquisition, LLC | IN | NIA | Anthem, Inc. | Ownership | 100.000 | Anthem, Inc. | N | |
| .0671 | Anthem, Inc. | | 20-4405193 | | | | WellPoint Behavioral Health, Inc. | DE | NIA | UNICARE Specialty Services, Inc. | Ownership | 100.000 | Anthem, Inc. | N | |
| .0671 | Anthem, Inc. | | 20-2156380 | | | | WellPoint California Services, Inc. | DE | NIA | Anthem Holding Corp. | Ownership | 100.000 | Anthem, Inc. | N | |
| .0671 | Anthem, Inc. | | 95-4640531 | | | | WellPoint Dental Services, Inc. | DE | NIA | UNICARE Specialty Services, Inc. | Ownership | 100.000 | Anthem, Inc. | N | |
| .0671 | Anthem, Inc. | | 81-2874917 | | | | WellPoint Health Solutions, Inc. | DE | NIA | Federal Government Solutions, LLC | Ownership | 100.000 | Anthem, Inc. | N | |
| .0671 | Anthem, Inc. | | 20-3620996 | | | | WellPoint Holding Corp | CA | NIA | Anthem, Inc. | Ownership | 100.000 | Anthem, Inc. | N | |
| | | | | | | | WellPoint Information Technology Services, Inc. | CA | NIA | Blue Cross of California | Ownership | 100.000 | Anthem, Inc. | N | |
| .0671 | Anthem, Inc. | | 45-2736438 | | | | WellPoint Insurance Services, Inc. | HI | NIA | Anthem, Inc. | Ownership | 100.000 | Anthem, Inc. | N | |
| .0671 | Anthem, Inc. | | 36-4595641 | | | | WellPoint Military Care Corporation | IN | NIA | Federal Government Solutions, LLC | Ownership | 100.000 | Anthem, Inc. | N | |
| .0671 | Anthem, Inc. | | 47-2546820 | | | | Wisconsin Collaborative Insurance Company | WI | IA | Crossroads Acquisition Corp. | Ownership | 50.000 | Anthem, Inc. | N | 0107 |
| .0671 | Anthem, Inc. | 15929 | 47-5569628 | | | | WPMI (Shanghai) Enterprise Service Co. Ltd. | CHN | NIA | WPMI, LLC | Ownership | 100.000 | Anthem, Inc. | N | |
| .0671 | Anthem, Inc. | | 98-0552141 | | | | WPMI, LLC | DE | NIA | ATH Holding Company, LLC | Ownership | 69.910 | Anthem, Inc. | N | 0106 |
| .0671 | Anthem, Inc. | | 20-8672847 | | | | | | | | | | | | |

| Asterisk | Explanation |
|----------|--|
| 0100 | Insurer is deemed to be an insurance affiliate in column 10, but does not have an NAIC Company Code in column 3 because it is regulated by the New York State Department of Health. |
| 0101 | Insurer is deemed to be an insurance affiliate in column 10, but does not have an NAIC Company Code in column 3 because it is regulated by the California Department of Managed Health Care. |
| 0102 | Insurer is deemed to be an insurance affiliate in column 10, but does not have an NAIC Compnay Code in column 3 because it is regulated by the California Department of Managed Health Care. |
| 0103 | Insurer is deemed to be an insurance affiliate in column 10, but does not have an NAIC Company Code in column 3 because it is regulated by the California Department of Managed Health Care. |
| 0104 | Insurer is deemed to be an insurance affiliate in column 10, but does not have an NAIC Company Code in column 3 because it is regulated by the California Department of Managed Health Care. |
| 0105 | 50% owned by unaffiliated investors |
| 0106 | 30.09% owned by unaffiliated investors |
| 0107 | 50% owned by an unaffiliated investor |
| 0108 | Received exemption from domestic regulator |
| 0109 | 20% owned by an unaffiliated investor |

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

The following supplemental reports are required to be filed as part of your statement filing. However, in the event that your company does not transact the type of business for which the special report must be filed, your response of NO to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason enter SEE EXPLANATION and provide an explanation following the interrogatory questions.

Response

1. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC with this statement?

NO

Explanation:

1.

Bar Code:

1. Medicare Part D Coverage Supplement [Document Identifier 365]



STATEMENT AS OF MARCH 31, 2017 OF THE Anthem Health Plans of Maine, Inc.

OVERFLOW PAGE FOR WRITE-INS

Additional Write-ins for Liabilities Line 23

| | | Current Period | | | Prior Year |
|-------|---|----------------|----------------|------------|------------|
| | | 1 Covered | 2 Uncovered | 3 Total | 4 Total |
| 2304. | Performance Guarantee Liability | 464,422 | | 464,422 | 655,340 |
| 2305. | Other Liabilities | 452,263 | | 452,263 | 467,275 |
| 2306. | Blue Card Liabilities | 213,472 | | 213,472 | 498,405 |
| 2397. | Summary of remaining write-ins for Line 23 from overflow page | 1,130,157 | 0 | 1,130,157 | 1,621,020 |

SCHEDULE A - VERIFICATION

Real Estate

| | 1 | 2 |
|--|--------------|---------------------------------|
| | Year to Date | Prior Year Ended December 31 |
| 1. Book/adjusted carrying value, December 31 of prior year | 72,500 | 72,500 |
| 2. Cost of acquired: | | |
| 2.1 Actual cost at time of acquisition | | |
| 2.2 Additional investment made after acquisition | | |
| 3. Current year change in encumbrances | | 0 |
| 4. Total gain (loss) on disposals | | |
| 5. Deduct amounts received on disposals | | |
| 6. Total foreign exchange change in book/adjusted carrying value | | 0 |
| 7. Deduct current year's other than temporary impairment recognized | | 0 |
| 8. Deduct current year's depreciation | | 0 |
| 9. Book/adjusted carrying value at the end of current period (Lines 1+2+3+4-5+6-7-8) | 72,500 | 72,500 |
| 10. Deduct total nonadmitted amounts | | 0 |
| 11. Statement value at end of current period (Line 9 minus Line 10) | 72,500 | 72,500 |

SCHEDULE B - VERIFICATION

Mortgage Loans

| | 1 | 2 |
|---|--------------|---------------------------------|
| | Year to Date | Prior Year Ended December 31 |
| 1. Book value/recorded investment excluding accrued interest, December 31 of prior year | | |
| 2. Cost of acquired: | | |
| 2.1 Actual cost at time of acquisition | | |
| 2.2 Additional investment made after acquisition | | |
| 3. Capitalized deferred interest and other | | |
| 4. Accrual of discount | | |
| 5. Unrealized valuation increase (decrease) | | |
| 6. Total gain (loss) on disposals | | |
| 7. Deduct amounts received on disposals | | |
| 8. Deduct amortization of premium and mortgage investment and commitment fees | | |
| 9. Total foreign exchange change in book value/recorded investment including accrued interest | | |
| 10. Deduct current year's other than temporary impairment recognized | | |
| 11. Book value/recorded investment excluding accrued interest at end of current period (Lines 1+2+3+4+5+6-7-8+9-10) | | |
| 12. Total valuation allowance | | |
| 13. Subtotal (Line 11 plus Line 12) | | |
| 14. Deduct total nonadmitted amounts | | |
| 15. Statement value at end of current period (Line 13 minus Line 14) | | |

NONE

SCHEDULE BA - VERIFICATION

Other Long-Term Invested Assets

| | 1 | 2 |
|--|--------------|---------------------------------|
| | Year to Date | Prior Year Ended December 31 |
| 1. Book/adjusted carrying value, December 31 of prior year | 137,985 | 144,047 |
| 2. Cost of acquired: | | |
| 2.1 Actual cost at time of acquisition | | |
| 2.2 Additional investment made after acquisition | | |
| 3. Capitalized deferred interest and other | | |
| 4. Accrual of discount | | |
| 5. Unrealized valuation increase (decrease) | (1,207) | (6,062) |
| 6. Total gain (loss) on disposals | | |
| 7. Deduct amounts received on disposals | | |
| 8. Deduct amortization of premium and depreciation | | |
| 9. Total foreign exchange change in book/adjusted carrying value | | |
| 10. Deduct current year's other than temporary impairment recognized | | |
| 11. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5+6-7-8+9-10) | 136,778 | 137,985 |
| 12. Deduct total nonadmitted amounts | | |
| 13. Statement value at end of current period (Line 11 minus Line 12) | 136,778 | 137,985 |

SCHEDULE D - VERIFICATION

Bonds and Stocks

| | 1 | 2 |
|---|--------------|---------------------------------|
| | Year to Date | Prior Year Ended December 31 |
| 1. Book/adjusted carrying value of bonds and stocks, December 31 of prior year | 190,140,929 | 205,859,810 |
| 2. Cost of bonds and stocks acquired | 14,562,111 | 58,580,962 |
| 3. Accrual of discount | 41,198 | 159,363 |
| 4. Unrealized valuation increase (decrease) | | |
| 5. Total gain (loss) on disposals | 92,309 | 101,113 |
| 6. Deduct consideration for bonds and stocks disposed of | 12,616,806 | 73,286,515 |
| 7. Deduct amortization of premium | 237,547 | 1,273,804 |
| 8. Total foreign exchange change in book/adjusted carrying value | | |
| 9. Deduct current year's other than temporary impairment recognized | | |
| 10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9) | 191,982,194 | 190,140,929 |
| 11. Deduct total nonadmitted amounts | | |
| 12. Statement value at end of current period (Line 10 minus Line 11) | 191,982,194 | 190,140,929 |

SCHEDULE D - PART 1B

Showing the Acquisitions, Dispositions and Non-Trading Activity
During the Current Quarter for all Bonds and Preferred Stock by NAIC Designation

| NAIC Designation | 1 Book/Adjusted Carrying Value Beginning of Current Quarter | 2 Acquisitions During Current Quarter | 3 Dispositions During Current Quarter | 4 Non-Trading Activity During Current Quarter | 5 Book/Adjusted Carrying Value End of First Quarter | 6 Book/Adjusted Carrying Value End of Second Quarter | 7 Book/Adjusted Carrying Value End of Third Quarter | 8 Book/Adjusted Carrying Value December 31 Prior Year |
|-------------------------------------|---|--|--|--|---|--|---|---|
| BONDS | | | | | | | | |
| 1. NAIC 1 (a) | 131,410,837 | 20,904,647 | 10,920,303 | (2,060,235) | 139,334,946 | 0 | 0 | 131,410,837 |
| 2. NAIC 2 (a) | 59,621,403 | 703,556 | 7,995,830 | 1,863,887 | 54,193,016 | 0 | 0 | 59,621,403 |
| 3. NAIC 3 (a) | 0 | | | | 0 | | | |
| 4. NAIC 4 (a) | 0 | | | | 0 | | | |
| 5. NAIC 5 (a) | 0 | | | | 0 | | | |
| 6. NAIC 6 (a) | 0 | | | | 0 | | | |
| 7. Total Bonds | 191,032,240 | 21,608,203 | 18,916,133 | (196,348) | 193,527,962 | 0 | 0 | 191,032,240 |
| PREFERRED STOCK | | | | | | | | |
| 8. NAIC 1 | 0 | | | | 0 | | | |
| 9. NAIC 2 | 0 | | | | 0 | | | |
| 10. NAIC 3 | 0 | | | | 0 | | | |
| 11. NAIC 4 | 0 | | | | 0 | | | |
| 12. NAIC 5 | 0 | | | | 0 | | | |
| 13. NAIC 6 | 0 | | | | 0 | | | |
| 14. Total Preferred Stock | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 15. Total Bonds and Preferred Stock | 191,032,240 | 21,608,203 | 18,916,133 | (196,348) | 193,527,962 | 0 | 0 | 191,032,240 |

(a) Book/Adjusted Carrying Value column for the end of the current reporting period includes the following amount of short-term and cash equivalent bonds by NAIC designation:
NAIC 1 \$ 1,545,768 ; NAIC 2 \$ 0 ; NAIC 3 \$ 0 NAIC 4 \$ 0 ; NAIC 5 \$ 0 ; NAIC 6 \$ 0

SCHEDULE DA - PART 1

Short-Term Investments

| | 1 | 2 | 3 | 4 | 5 |
|----------------|---------------------------------|-----------|-------------|------------------------------------|--|
| | Book/Adjusted Carrying Value | Par Value | Actual Cost | Interest Collected Year-to-Date | Paid for Accrued Interest Year-to-Date |
| 9199999 Totals | 1,545,768 | XXX | 1,545,768 | 0 | 0 |

SCHEDULE DA - VERIFICATION

Short-Term Investments

| | 1 | 2 |
|---|--------------|---------------------------------|
| | Year To Date | Prior Year Ended December 31 |
| 1. Book/adjusted carrying value, December 31 of prior year | .891,311 | .3,678,914 |
| 2. Cost of short-term investments acquired | .7,046,093 | .59,816,809 |
| 3. Accrual of discount | | |
| 4. Unrealized valuation increase (decrease) | | |
| 5. Total gain (loss) on disposals | | (1) |
| 6. Deduct consideration received on disposals | .6,391,636 | .62,604,411 |
| 7. Deduct amortization of premium | | |
| 8. Total foreign exchange change in book/adjusted carrying value | | |
| 9. Deduct current year's other than temporary impairment recognized | | |
| 10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9) | 1,545,768 | .891,311 |
| 11. Deduct total nonadmitted amounts | | |
| 12. Statement value at end of current period (Line 10 minus Line 11) | 1,545,768 | 891,311 |

Schedule DB - Part A - Verification - Options, Caps, Floors, Collars, Swaps and Forwards

N O N E

Schedule DB - Part B - Verification - Futures Contracts

N O N E

Schedule DB - Part C - Section 1 - Replication (Synthetic Asset) Transactions (RSATs) Open

N O N E

Schedule DB-Part C-Section 2-Reconciliation of Replication (Synthetic Asset) Transactions Open

N O N E

Schedule DB - Verification - Book/Adjusted Carrying Value, Fair Value and Potential Exposure of
Derivatives

N O N E

Schedule E - Verification - Cash Equivalents

N O N E

Schedule A - Part 2 - Real Estate Acquired and Additions Made

N O N E

Schedule A - Part 3 - Real Estate Disposed

N O N E

Schedule B - Part 2 - Mortgage Loans Acquired and Additions Made

N O N E

Schedule B - Part 3 - Mortgage Loans Disposed, Transferred or Repaid

N O N E

Schedule BA - Part 2 - Other Long-Term Invested Assets Acquired and Additions Made

N O N E

Schedule BA - Part 3 - Other Long-Term Invested Assets Disposed, Transferred or Repaid

N O N E

STATEMENT AS OF MARCH 31, 2017 OF THE Anthem Health Plans of Maine, Inc.

SCHEDULE D - PART 3

Show All Long-Term Bonds and Stock Acquired During the Current Quarter

| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 |
|---|---|---------|---------------|--------------------------------|---------------------------|-------------|------------|---|--|
| CUSIP Identification | Description | Foreign | Date Acquired | Name of Vendor | Number of Shares of Stock | Actual Cost | Par Value | Paid for Accrued Interest and Dividends | NAIC Designation or Market Indicator (a) |
| 0258MO-EB-1 | AMERICAN EXPRESS CREDIT SERIES MTN 2.250% 05/05/21 | | .03/15/2017 | US Bancorp | | 786,144 | 800,000 | 6,750 | 1FE |
| 037833-CM-0 | APPLE COMPUTER INC SERIES 5YR 2.500% 02/09/22 | | .03/01/2017 | Various | | 3,503,105 | 3,500,000 | 4,340 | 1FE |
| 37045X-BM-7 | GENERAL MOTORS FINL CO 3.200% 07/06/21 | | .03/29/2017 | CREDIT AGRICOLE SECURITIES (US | | 703,556 | 700,000 | 5,413 | 2FE |
| 42824C-AG-4 | HP ENTERPRISE CO SERIES III 3.600% 10/15/20 | | .03/15/2017 | Piper Jeffries & Co | | 921,372 | 901,000 | 14,435 | 2FE |
| 459200-HG-9 | IBM CORP 1.875% 08/01/22 | | .03/10/2017 | Various | | 2,500,922 | 2,600,000 | 3,771 | 1FE |
| 63946B-AE-0 | NBC UNIVERSAL MEDIA LLC 4.375% 04/01/21 | | .03/15/2017 | BONY/TORONTO DOMINION | | 473,302 | 442,000 | 9,078 | 1FE |
| 89233P-7F-7 | TOYOTA MOTOR CREDIT CORP SERIES MTN 2.625% 01/10/23 | | .01/27/2017 | Morgan Stanley | | 1,783,530 | 1,800,000 | 2,756 | 1FE |
| 90327Q-CY-3 | USAA CAPITAL CORP SERIES 144A 2.000% 06/01/21 | | .01/03/2017 | Bank of America | | 978,160 | 1,000,000 | 1,944 | 1FE |
| 06367T-JX-9 | BANK OF MONTREAL SERIES MTN 1.900% 08/27/21 | A | .01/10/2017 | Various | | 972,230 | 1,000,000 | 7,072 | 1FE |
| 89114Q-BL-1 | TORONTO DOMINION BANK 1.800% 07/13/21 | A | .01/03/2017 | NBON Clearing Services | | 967,920 | 1,000,000 | 8,650 | 1FE |
| 961214-DA-8 | WESTPAC BANKING CORP 2.000% 08/19/21 | D | .01/09/2017 | Daiwa Securities | | 971,870 | 1,000,000 | 7,944 | 1FE |
| 3899999. Subtotal - Bonds - Industrial and Miscellaneous (Unaffiliated) | | | | | | 14,562,111 | 14,743,000 | 72,153 | XXX |
| 8399997. Total - Bonds - Part 3 | | | | | | 14,562,111 | 14,743,000 | 72,153 | XXX |
| 8399998. Total - Bonds - Part 5 | | | | | | XXX | XXX | XXX | XXX |
| 8399999. Total - Bonds | | | | | | 14,562,111 | 14,743,000 | 72,153 | XXX |
| 8999997. Total - Preferred Stocks - Part 3 | | | | | | 0 | XXX | 0 | XXX |
| 8999998. Total - Preferred Stocks - Part 5 | | | | | | XXX | XXX | XXX | XXX |
| 8999999. Total - Preferred Stocks | | | | | | 0 | XXX | 0 | XXX |
| 9799997. Total - Common Stocks - Part 3 | | | | | | 0 | XXX | 0 | XXX |
| 9799998. Total - Common Stocks - Part 5 | | | | | | XXX | XXX | XXX | XXX |
| 9799999. Total - Common Stocks | | | | | | 0 | XXX | 0 | XXX |
| 9899999. Total - Preferred and Common Stocks | | | | | | 0 | XXX | 0 | XXX |
| 9999999 - Totals | | | | | | 14,562,111 | XXX | 72,153 | XXX |

(a) For all common stock bearing the NAIC market indicator "U" provide: the number of such issues

STATEMENT AS OF MARCH 31, 2017 OF THE Anthem Health Plans of Maine, Inc.

SCHEDULE D - PART 4

Show All Long-Term Bonds and Stock Sold, Redeemed or Otherwise Disposed of During the Current Quarter

| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | Change In Book/Adjusted Carrying Value | | | | | 16 | 17 | 18 | 19 | 20 | 21 | 22 | |
|------------------------------|--|--------------|------------------|--------------------------------|---------------------------------|--------------------|------------|----------------|--|--|--|---|---|---|---|--|---|-------------------------------------|--|--|---|-----|
| | | | | | | | | | | 11 | 12 | 13 | 14 | 15 | | | | | | | | |
| CUSIP Ident- ification | Description | For- eign | Disposal Date | Name of Purchaser | Number of Shares of Stock | Consid- eration | Par Value | Actual Cost | Prior Year Book/ Adjusted Carrying Value | Unrealized Valuation Increase/ (Decrease) | Current Year's (Amor- tization)/ Accretion | Current Year's Other Than Temporary Impairment Recog- nized | Total Change in Book/ Adjusted Carrying Value (11 + 12 - 13) | Total Foreign Exchange Change in Book /Adjusted Carrying Value | Book/ Adjusted Carrying Value at Disposal Date | Foreign Exchange Gain (Loss) on Disposal | Realized Gain (Loss) on Disposal | Total Gain (Loss) on Disposal | Bond Interest/ Stock Dividends Received During Year | Stated Con- tractual Maturity Date | NAIC Desig- nation or Market In- dicator (a) | |
| 176553-CC-7 | CITIZENS PPTY INS CORP FLA 5.000% 03/01/17 | | 03/01/2017 | Maturity | | 1,255,000 | 1,255,000 | 1,367,435 | 1,257,236 | .0 | (2,236) | .0 | (2,236) | .0 | 1,255,000 | .0 | .0 | .0 | 31,375 | 03/01/2017 | 1FE | |
| 87638T-AK-9 | TARRANT CNTY TEX CULT ED FACS REF- TEXAS HEALTH RESORCES- A 5.000% 02/15/19 | | 02/15/2017 | Call 100.0000 | | 925,000 | 925,000 | 972,129 | 925,717 | .0 | (717) | .0 | (717) | .0 | 925,000 | .0 | .0 | .0 | 23,125 | 02/15/2019 | 1FE | |
| 3199999 | Subtotal - Bonds - U.S. Special Revenues | | | | | 2,180,000 | 2,180,000 | 2,339,564 | 2,182,953 | 0 | (2,953) | 0 | (2,953) | 0 | 2,180,000 | 0 | 0 | 0 | 54,500 | XXX | XXX | |
| 125509-BJ-7 | CIGNA CORP 5.375% 03/15/17 | | 03/15/2017 | Maturity | | 1,000,000 | 1,000,000 | 1,131,180 | 1,005,932 | .0 | (5,932) | .0 | (5,932) | .0 | 1,000,000 | .0 | .0 | .0 | 26,875 | 03/15/2017 | 2FE | |
| 20826F-AB-2 | CONOCOPHILLIPS COMPANY 1.050% 12/15/17 | | 01/03/2017 | Scotia Capital | | 995,480 | 1,000,000 | 998,140 | 999,630 | .0 | .5 | .0 | .5 | .0 | 999,635 | .0 | (4,155) | (4,155) | 613 | 12/15/2017 | 1FE | |
| 34539T-WP-4 | FORD MOTOR CREDIT CO 2.375% 03/12/19 | | 01/06/2017 | Merrill Lynch | | 699,433 | 700,000 | 697,242 | 698,542 | .0 | .18 | .0 | .18 | .0 | 698,560 | .0 | .873 | .873 | 5,495 | 03/12/2019 | 2FE | |
| 406216-AV-3 | HALLIBURTON CO 5.900% 09/15/18 | | 01/27/2017 | Chase | | 1,063,290 | 1,000,000 | 1,222,800 | 1,063,993 | .0 | (3,071) | .0 | (3,071) | .0 | 1,060,923 | .0 | 2,367 | 2,367 | 22,289 | 09/15/2018 | 2FE | |
| 500255-AU-8 | KOHL'S CORP 4.250% 07/17/25 | | 03/09/2017 | Citigroup Global Markets | | 45,950 | 48,000 | 47,214 | 47,280 | .0 | .14 | .0 | .14 | .0 | 47,295 | .0 | (1,344) | (1,344) | 1,343 | 07/17/2025 | 2FE | |
| 66989H-AD-0 | NOVARTIS CAPITAL CORP 4.400% 04/24/20 | | 02/10/2017 | MarketAxess Corporation | | 376,131 | 350,000 | 347,330 | 348,998 | .0 | .34 | .0 | .34 | .0 | 349,032 | .0 | 27,099 | 27,099 | 4,748 | 04/24/2020 | 1FE | |
| 69371R-K5-4 | PACCAR FINANCIAL CORP SERIES MTN 1.600% 03/15/17 | | 03/15/2017 | Maturity | | 1,000,000 | 1,000,000 | 1,006,960 | 1,000,435 | .0 | (435) | .0 | (435) | .0 | 1,000,000 | .0 | .0 | .0 | 8,000 | 03/15/2017 | 1FE | |
| 84755T-AA-5 | SPECTRA ENERGY CAPITAL 6.200% 04/15/18 | | 02/10/2017 | Morgan Stanley | | 1,047,570 | 1,000,000 | 1,193,090 | 1,045,250 | .0 | (4,227) | .0 | (4,227) | .0 | 1,041,024 | .0 | 6,546 | 6,546 | 20,667 | 04/15/2018 | 2FE | |
| 91913Y-AN-0 | VALERO ENERGY CORP 9.375% 03/15/19 | | 02/16/2017 | Pershing | | 1,146,080 | 1,000,000 | 1,315,030 | 1,111,734 | .0 | (6,858) | .0 | (6,858) | .0 | 1,104,877 | .0 | 41,203 | 41,203 | 40,885 | 03/15/2019 | 2FE | |
| 925524-AU-4 | VIACOM INC 4.625% 05/15/18 | | 03/10/2017 | US Bancorp | | 1,031,590 | 1,000,000 | 1,103,530 | 1,025,274 | .0 | (3,730) | .0 | (3,730) | .0 | 1,021,544 | .0 | 10,046 | 10,046 | 15,417 | 05/15/2018 | 2FE | |
| 98310W-AK-4 | WYNDHAM WORLDWIDE CORP 2.500% 03/01/18 | | 01/03/2017 | MarketAxess Corporation | | 1,208,340 | 1,200,000 | 1,200,816 | 1,200,216 | .0 | (3) | .0 | (3) | .0 | 1,200,213 | .0 | 8,127 | 8,127 | 10,417 | 03/01/2018 | 2FE | |
| 478375-AE-8 | JOHNSON CONTROLS INTL PL 4.250% 03/01/21 | D | 01/10/2017 | National Financial Services | | 822,942 | 775,000 | 821,832 | 821,744 | .0 | (350) | .0 | (350) | .0 | 821,395 | .0 | 1,547 | 1,547 | 12,077 | 03/01/2021 | 2FE | |
| 38999999 | Subtotal - Bonds - Industrial and Miscellaneous (Unaffiliated) | | | | | 10,436,806 | 10,073,000 | 11,085,164 | 10,369,028 | 0 | (24,535) | 0 | (24,535) | 0 | 10,344,498 | 0 | 92,309 | 92,309 | 168,826 | XXX | XXX | |
| 83999997 | Total - Bonds - Part 4 | | | | | 12,616,806 | 12,253,000 | 13,424,728 | 12,551,981 | 0 | (27,488) | 0 | (27,488) | 0 | 12,524,498 | 0 | 92,309 | 92,309 | 223,326 | XXX | XXX | |
| 83999998 | Total - Bonds - Part 5 | | | | | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX |
| 83999999 | Total - Bonds | | | | | 12,616,806 | 12,253,000 | 13,424,728 | 12,551,981 | 0 | (27,488) | 0 | (27,488) | 0 | 12,524,498 | 0 | 92,309 | 92,309 | 223,326 | XXX | XXX | |
| 89999997 | Total - Preferred Stocks - Part 4 | | | | | 0 | XXX | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | XXX | XXX | |
| 89999998 | Total - Preferred Stocks - Part 5 | | | | | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX |
| 89999999 | Total - Preferred Stocks | | | | | 0 | XXX | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | XXX | XXX | |
| 97999997 | Total - Common Stocks - Part 4 | | | | | 0 | XXX | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | XXX | XXX | |
| 97999998 | Total - Common Stocks - Part 5 | | | | | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX |
| 97999999 | Total - Common Stocks | | | | | 0 | XXX | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | XXX | XXX | |
| 98999999 | Total - Preferred and Common Stocks | | | | | 0 | XXX | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | XXX | XXX | |
| 99999999 | Totals | | | | | 12,616,806 | XXX | 13,424,728 | 12,551,981 | 0 | (27,488) | 0 | (27,488) | 0 | 12,524,498 | 0 | 92,309 | 92,309 | 223,326 | XXX | XXX | |

(a) For all common stock bearing the NAIC market indicator "U" provide: the number of such issues.....

Schedule DB - Part A - Section 1 - Options, Caps, Floors, Collars, Swaps and Forwards Open
N O N E

Schedule DB - Part B - Section 1 - Futures Contracts Open
N O N E

Schedule DB - Part B - Section 1B - Brokers with whom cash deposits have been made
N O N E

Schedule DB - Part D - Section 1 - Counterparty Exposure for Derivative Instruments Open
N O N E

Schedule DB - Part D-Section 2 - Collateral for Derivative Instruments Open - Pledged By
N O N E

Schedule DB - Part D-Section 2 - Collateral for Derivative Instruments Open - Pledged To
N O N E

SCHEDULE DL - PART 1
SECURITIES LENDING COLLATERAL ASSETS

| Reinvested Collateral Assets Owned Current Statement Date | | | | | | |
|--|--------------------------------|-----------|---|-----------------|--------------------------------------|--------------------|
| 1 CUSIP Identification | 2 Description | 3 Code | 4 NAIC Designation/ Market Indicator | 5 Fair Value | 6 Book/Adjusted Carrying Value | 7 Maturity Date |
| 0599999. Total - U.S. Government Bonds | | | | 0 | 0 | XXX |
| 1099999. Total - All Other Government Bonds | | | | 0 | 0 | XXX |
| 1799999. Total - U.S. States, Territories and Possessions Bonds | | | | 0 | 0 | XXX |
| 2499999. Total - U.S. Political Subdivisions Bonds | | | | 0 | 0 | XXX |
| 3199999. Total - U.S. Special Revenues Bonds | | | | 0 | 0 | XXX |
| 000000-00-0 | CITIGROUP GLOBAL MARKETS | | 2 | 569,296 | 569,296 | 04/03/2017 |
| 000000-00-0 | PERSHING LLC | | 1 | 784,980 | 784,980 | 04/03/2017 |
| 000000-00-0 | CANTOR FITZGERALD & CO | | 1 | 10,614 | 10,614 | 04/03/2017 |
| 000000-00-0 | CITIGROUP GLOBAL MARKETS | | 2 | 1,744,401 | 1,744,401 | 05/04/2017 |
| 000000-00-0 | JP MORGAN CLEARING CORP | | 1 | 1,744,401 | 1,744,401 | 06/29/2017 |
| 3299999. Subtotal - Bonds - Industrial and Miscellaneous (Unaffiliated) - Issuer Obligations | | | | 4,853,692 | 4,853,692 | XXX |
| 3899999. Total - Industrial and Miscellaneous (Unaffiliated) Bonds | | | | 4,853,692 | 4,853,692 | XXX |
| 4899999. Total - Hybrid Securities | | | | 0 | 0 | XXX |
| 5599999. Total - Parent, Subsidiaries and Affiliates Bonds | | | | 0 | 0 | XXX |
| 6099999. Subtotal - SVO Identified Funds | | | | 0 | 0 | XXX |
| 6199999. Total - Issuer Obligations | | | | 4,853,692 | 4,853,692 | XXX |
| 6299999. Total - Residential Mortgage-Backed Securities | | | | 0 | 0 | XXX |
| 6399999. Total - Commercial Mortgage-Backed Securities | | | | 0 | 0 | XXX |
| 6499999. Total - Other Loan-Backed and Structured Securities | | | | 0 | 0 | XXX |
| 6599999. Total - SVO Identified Funds | | | | 0 | 0 | XXX |
| 6699999. Total Bonds | | | | 4,853,692 | 4,853,692 | XXX |
| 7099999. Total - Preferred Stocks | | | | 0 | 0 | XXX |
| 000000-00-0 | NOMURA SECURITIES INTL | | L | 988,494 | 988,494 | 04/03/2017 |
| 000000-00-0 | JP MORGAN CLEARING CORP | | L | 1,453,667 | 1,453,667 | 04/03/2017 |
| 000000-00-0 | JP MORGAN CLEARING CORP | | L | 523,320 | 523,320 | 06/29/2017 |
| 000000-00-0 | Morgan Stanley & Co. LLC | | L | 2,035,134 | 2,035,134 | 06/30/2017 |
| 000000-00-0 | Morgan Stanley & Co. LLC | | L | 1,453,667 | 1,453,667 | 05/05/2017 |
| 7199999. Subtotal - Common Stocks - Industrial and Miscellaneous (Unaffiliated) | | | | 6,454,282 | 6,454,282 | XXX |
| 7599999. Total - Common Stocks | | | | 6,454,282 | 6,454,282 | XXX |
| 7699999. Total - Preferred and Common Stocks | | | | 6,454,282 | 6,454,282 | XXX |
| 9999999 - Totals | | | | 11,307,974 | 11,307,974 | XXX |

General Interrogatories:

1. Total activity for the year to date Fair Value \$822,838 Book/Adjusted Carrying Value \$822,838
2. Average balance for the year to date Fair Value \$11,529,343 Book/Adjusted Carrying Value \$11,529,343
3. Reinvested securities lending collateral assets book/adjusted carrying value included in this schedule by NAIC designation:
NAIC 1 \$2,539,995 NAIC 2 \$2,313,697 NAIC 3 \$ NAIC 4 \$ NAIC 5 \$ NAIC 6 \$

STATEMENT AS OF MARCH 31, 2017 OF THE Anthem Health Plans of Maine, Inc.

SCHEDULE DL - PART 2
SECURITIES LENDING COLLATERAL ASSETS

Reinvested Collateral Assets Owned Current Statement Date

| 1 CUSIP Identification | 2 Description | 3 Code | 4 NAIC Designation/ Market Indicator | 5 Fair Value | 6 Book/Adjusted Carrying Value | 7 Maturity Date |
|--|------------------|-----------|---|-----------------|--------------------------------------|--------------------|
| <div style="font-size: 100px; font-weight: bold; opacity: 0.5;">NONE</div> | | | | | | |
| 9999999 - Totals | | | | | | XXX |

General Interrogatories:

- | | | |
|---|---------------------|---------------------------------------|
| 1. Total activity for the year to date | Fair Value \$ | Book/Adjusted Carrying Value \$ |
| 2. Average balance for the year to date | Fair Value \$ | Book/Adjusted Carrying Value \$ |

SCHEDULE E - PART 1 - CASH

Month End Depository Balances

| 1 | 2 | 3 | 4 | 5 | Book Balance at End of Each Month During Current Quarter | | | 9 |
|--|------|------------------|--|--|---|--------------|-------------|-----|
| | | | | | 6 | 7 | 8 | |
| | | | | | First Month | Second Month | Third Month | |
| Depository | Code | Rate of Interest | Amount of Interest Received During Current Quarter | Amount of Interest Accrued at Current Statement Date | | | | * |
| Bank of America Hartford, CT | | | | | (7,802,435) | 32,187,377 | 17,874,287 | XXX |
| Citibank New Castle, DE | | | | | 190,663 | 133,698 | 127,326 | XXX |
| Bank of New York Mellon New York, NY | | | | | (222,247) | (132,631) | (345,112) | XXX |
| 0199998. Deposits in ... depositories that do not exceed the allowable limit in any one depository (See instructions) - Open Depositories | XXX | XXX | | | | | | XXX |
| 0199999. Totals - Open Depositories | XXX | XXX | 0 | 0 | (7,834,019) | 32,188,444 | 17,656,501 | XXX |
| 0299998. Deposits in ... depositories that do not exceed the allowable limit in any one depository (See instructions) - Suspended Depositories | XXX | XXX | | | | | | XXX |
| 0299999. Totals - Suspended Depositories | XXX | XXX | 0 | 0 | 0 | 0 | 0 | XXX |
| 0399999. Total Cash on Deposit | XXX | XXX | 0 | 0 | (7,834,019) | 32,188,444 | 17,656,501 | XXX |
| 0499999. Cash in Company's Office | XXX | XXX | XXX | XXX | | | | XXX |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| 0599999. Total - Cash | XXX | XXX | 0 | 0 | (7,834,019) | 32,188,444 | 17,656,501 | XXX |

STATEMENT AS OF MARCH 31, 2017 OF THE Anthem Health Plans of Maine, Inc.

SCHEDULE E - PART 2 - CASH EQUIVALENTS

Show Investments Owned End of Current Quarter

| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 |
|----------------------------------|------|---------------|------------------|---------------|---------------------------------|---------------------------------------|--------------------------------|
| Description | Code | Date Acquired | Rate of Interest | Maturity Date | Book/Adjusted Carrying Value | Amount of Interest Due and Accrued | Amount Received During Year |
| NONE | | | | | | | |
| 8699999 - Total Cash Equivalents | | | | | | | |